



## There is no significant association between use of $\beta$ -blockers and depression

### ***The Science behind the Tip***

The methodological quality of early studies of the association of systemic or topical  $\beta$ -blocker therapy and depressed mood is weak. Most of the evidence supporting an association has used case reports. Further, the mechanism by which  $\beta$ -blockers might induce depression remains unclear. Lipophilic  $\beta$ -blockers easily penetrate the blood-brain barrier and should thus cause more central nervous system disturbances than hydrophilic ones. Yet, relative lipophilicity has not proved to play a role<sup>1,2</sup>.

The increased use of  $\beta$ -blockers in recent years in the treatment of myocardial infarction and heart failure has led to renewed interest in the matter. Several syntheses of the data<sup>3</sup> and a meta-analysis of randomized clinical trials<sup>2</sup> have shown that the association is much weaker than originally believed and might even be non-existent. Additionally, a recent multicenter prospective study of post-myocardial infarction patients could not demonstrate an association in the first year of treatment<sup>4</sup>.

In line with the cardiovascular literature, a retrospective observational population-based cohort study found no effect of topical  $\beta$ -blockers on the prevalence of depression among glaucoma patients<sup>5</sup>.

### ***References***

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