

EDITORIAL

**Improvement of Outcome in Patients with Depression:
Positive Emotion and Recovery of Interest**

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Depression is the most common mental health concerns of people seeking psychological or psychiatric services due to its significant impairment in life functioning. The two most prominent depressive symptoms are recurrent low mood and anhedonia – loss of interest and motivation to experience pleasure [1]. The conventional outlook on depression by mental health professionals has been revolving around the presence of negative emotions like depressed mood, sadness and guilt, with the treatment focusing heavily on alleviating such emotions. With treatments focusing heavily on alleviating emotions like depressed mood and guilt, many patients feel less depressed but their anhedonia tends to persist.

In fact, studies in Malaysia shown after pharmacological treatment, many depressed patients still report inability to experience pleasure [2,3,4]. Their hedonic capacity was still significantly different than healthy subjects. They are not sad, but do not look forward to future because being restricted due to the enduring anhedonia present in depression. This anhedonic aspect of depression has largely neglected due to lack of effort on helping depressed patients to regain their positive emotions and interests in life.

Therefore, a valid scale to assess positive emotions or hedonic aspect in patients with depression in the Malaysian context is particularly important. To address this need, Positive Emotion Rating Scale (PERS) with satisfactory reliability and validity is developed to measure the positive emotions in depressed patients, mainly in the six domains of interest, gratification, activeness, contentment, love and pride [5,6].

Hence, we raise the attention pertaining to the traditional treatment approach of depression: apart from minimizing the associated negative emotions, should the focus equally be on helping patients regain their positive emotion and hedonic ability as well?

References

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