FIGURES

Figure 1: Flowchart of search and review of eligible studies

Records identified through database searching

n = 5619

(original search n = 4707;

updated search n =912)

Additional records identified through other sources

n = 3

(original search n = 3;

updated search n = 0)

Records after duplicates removed

n = 4119

(original searches n = 3455;

updated search n=664)

Records screened

n = 4119

(original searches n = 3455;

updated search n=664)

Records excluded

n = 4034  
(original searches n = 3373; updated search n = 661)

Full-text articles excluded

n = 62

(original searches n = 60 + 1 unobtainable; updated search n = 62)

Full-text articles assessed for eligibility

n = 84  
(original searches n = 81 + 1 unobtainable; updated search n = 3)

Studies included in qualitative synthesis

n = 22

(original searches n = 21;

updated search n = 1)

Figure 2: Subthemes of barriers and facilitators associated with each analytical theme

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| **Themes** |  | **Barriers (subthemes)** |  | **Facilitators (subthemes)** |
|  |  |  |  |  |
| **1. PSYCHOLOGICAL AND PHYSICAL CAPABILITIES** |  | **DEPENDENCE**  **EXPERIENCE OF PROBLEMATIC DISCONTINUATION ATTEMPTS**  **LIFE CIRCUMSTANCES DIFFICULT**  **ROUTINE**  **INTERMITTENT NEED**  **COPING STRATEGIES INEFFECTIVE** |  | **CONFIDENCE IN CAPABILITY TO DISCONTINUE**  **COPING STRATEGIES EFFECTIVE**  **LIFE CIRUCMSTANCES STABLE**  **ACCEPTABLE EXPERIENCE OF DOSE REDUCTION**  **KNOWLEDGE TO TAPER** |
|  |  |  |  |  |
| **2. PERCEPTION OF ANTIDEPRESSANTS** |  | **POSITIVE EFFECT**  **NATURAL/BENIGN CHARACTERISATION**  **LACK OF CONCERN OVER SIDE EFFECTS** |  | **INEFFECTUAL**  **EXPERIENCE OF UNACCEPTABLE SIDE EFFECTS**  **NEGATIVE/UNNATURAL CHARCTERISATION**  **UNHAPPY ABOUT LONG TERM USE** |
|  |  |  |  |  |
| **3. FEARS** |  | **FEAR OF RELAPSE**  **FEAR OF WITHDRAWAL EFFECTS**  **FEAR - MISCELLEANEOUS** |  | **FEAR OF ADDICTION**  **FEAR OF POTENTIAL SIDE EFFECTS** |
|  |  |  |  |  |
| **4. INTRINSIC MOTIVATORS AND GOALS** |  | **SELF-IDENTITY (DISABLED, “GOOD MOTHER/DAUGHTER”, OLD)**  **THREAT TO STABILITY**  **IRRATIONAL**  **GOAL PRIORITY IS BENEFIT OF CONTINUING TO SIGNIFICANT OTHERS**  **GOAL IS MANAGEMENT RATHER THAN CURE** |  | **SELF-IDENTITY (HEALTHY, TRUE-SELF, “GOOD MOTHER/DAUGHTER”)**  **DESIRE TO FUNCTION WITHOUT ANTIDEPRESSANTS**  **FEELING BETTER**  **SELF-STIGMA OF TAKING ANTIDEPRESSANTS** |
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| **5.THE DOCTOR AS A NAVIGATOR TO MAINTENANCE OR DISCONTINUATION** |  | **DOCTOR’S WORK PRACTICES**  **DOCTOR’S WORK ISSUES – LACK OF TIME**  **DOCTOR RECOMMENDS CONTINUATION**  **DOCTOR’S RESPONSIBILITY TO INITIATE DISCUSSIONS ABOUT DISCONTINUATION**  **LACK OR INADEQUACY OF DOCTOR SUPPORT/GUIDANCE** |  | **DOCTOR’S SUPPORT/GUIDANCE**  **DOCTOR RECOMMENDS/APPROVES DISCONTINUATION** |
|  |  |  |  |  |
| **6. PERCEIVED CAUSE OF DEPRESSION** |  | **LONG TERM CONDITION AND TREATMENT**  **ETIOLOGY - BIOCHEMICAL** |  | **ETIOLOGY – LIFE CIRCUMSTANCES, SEASONAL** |
|  |  |  |  |  |
| **7. ASPECTS OF INFORMATION THAT SUPPORT DECISION-MAKING** |  | **INCONGRUENT INFORMATION ABOUT DISCONTINUATION OF ANTIDEPRESSANTS**  **INSUFFICIENT INFORMATION ON HOW TO DISCONTINUE, AND OF RISKS AND BENEFITS OF DISCONTINUATION** |  | **INFORMATION ON HOW TO DISCONTINUE AND WHAT TO EXPECT** |
|  |  |  |  |  |
| **8. SIGNIFICANT OTHERS – A HELP OR A HINDRANCE** |  | **PRESSURE TO CONTINUE** |  | **PRESSURE TO DISCONTINUE**  **SUPPORT/GUIDANCE** |
|  |  |  |  |  |
| **9. SUPPORT OF OTHER HEALTH PROFESSIONALS** |  | ***No subthemes*** |  | **SUPPORT** |