Scientific research has long suggested that the reduction or discontinuation, both gradual and abrupt, of antidepressants determines the appearance of withdrawal symptoms. Usually the patient interprets (and unfortunately also many clinicians) these symptoms as a recurrence of the disease following therapy reduction. On the contrary, this phenomenon has been described in the scientific literature as caused by the abstinence from SSRI (Selective Serotonin Reuptake Inhibitor) antidepressants or SNRI (Serotonin and Noradrenaline Reuptake Inhibitor) antidepressants. Withdrawal symptoms occur after 24 - 96 hours after the drug has been reduced or discontinued and may last several weeks but also months or years. They have severe health implications and deserve great attention from the mental health institutions. A comprehensive list of withdrawal symptoms that may arise after dose reduction or discontinuation of SSRIs or SNRIs can be retrieved in Chouinard G, Chouinard VA. New Classification of Selective Serotonin Reuptake Inhibitor Withdrawal. Psychotherapy and Psychosomatics 2015;84(2):63-71. This seminal paper also proposes the criteria to diagnose withdrawal syndromes which occur after dose reduction or discontinuation of SSRIs or SNRIs. Following this path, together with Guy Chouinard, Virginie-Anne Chouinard, and Giovanni Andrea Fava, we built a semi-structured interview aimed at formulating the diagnosis of withdrawal syndromes after dose reduction or discontinuation of SSRs or SNRIs (Cosci F, Chouinard G, Chouinard VA, Fava GA: The “Diagnostic clinical Interview for Drug Withdrawal 1 (DID-W1) – New Symptoms of Selective Serotonin Reuptake Inhibitors (SSRI) or Serotonin Norepinephrine Reuptake Inhibitors (SNRI)”: Inter-rater Reliability. Riv Psich, in press). Such kind of tools allow a more comprehensive assessment of the patients and bring out these submerged diagnoses, contributing in deleting the denial of their existence.