

SOUTHWESTERN NEWS

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UT SOUTHWESTERN RESEARCHER, COLLEAGUES REPORT DRUG THERAPY EASES CHRONIC DEPRESSION

DALLAS – Oct. 10, 2002 – A team of scientists representing 12 collaborating health-care centers, including UT Southwestern Medical Center at Dallas, have found that antidepressant therapy – specifically sertraline hydrochloride, or Zoloft – can enhance the lives of many chronically depressed patients. The team’s findings also showed that discontinuing treatment to patients courts relapse and loss of psychosocial skills.

Dr. John Rush, an internationally known depression researcher who is vice chairman of research in psychiatry at UT Southwestern, said the results send a strong message to health maintenance organizations and insurance companies that deny long-term treatment for a disease that affects millions of Americans. The study, reported in the *Archives of General Psychiatry*, is the first to systematically look at the long-term impact of depression treatment in the lives of patients and the effects of stopping treatment, said Rush, who was an investigator on the study.

“Chronic depression is an enemy that attacks a person’s entire life. The disease incapacitates its victim, laying siege to relationships, educational and vocational success, and even the personal experiencing of joy, pleasure or satisfaction,” said Rush.

In all, 635 patients with chronic depression completed 12 weeks of short-term treatment. Those who improved on the Zoloft treatment (209) underwent a four-month continuation trial. Ninety-five percent of those patients responded favorably and were randomized to Zoloft or a placebo for an 18-month maintenance trial. The patients taking Zoloft reported improvement rates of 58 percent to 84 percent on tests qualifying psychosocial dynamics such as functioning, attitudes and quality of life. Only 6 percent of the Zoloft patients relapsed into depression while the placebo group’s relapse rate was 23 percent.

Study volunteers had either chronic major depression or double depression, a low-level depression disease interrupted by occasional episodes of major depression. Rush said both forms of the disease are frequently associated with significant degrees of social and vocational role

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impairment and lower levels of academic and vocational achievement.

“Study results showed that most patients not only feel much better after short-term antidepressant therapy but are able to function better, which is surprising considering the seriousness of the illness,” Rush said. “Most responders are much improved in just six to 12 weeks; however, they tended to lose these psychosocial gains after being off medication a while.”

The study findings are important, Rush said, because they suggest that the social and vocational problems patients with chronic depression experience are treatable and are not just ingrained personality traits.

“The study clearly shows that long-term treatment of chronic forms of depression can result in sustained psychosocial benefits,” Rush said. “However, discontinuing drug treatment results in frequent re-emergence of symptoms.”

Besides Rush, authors of the study in the August issue of *Archives* included scientists from Weill Medical College of Cornell University, Columbia University College of Physicians and Surgeons, Stanford University School of Medicine, State University of New York at Stony Brook Health Sciences Center School of Medicine, University of Pittsburgh School of Medicine, Pfizer, and Quintiles Transnational Corp.

The study was funded by a grant from Pfizer.

People interested in participating in upcoming chronic depression studies should call 214-648-8333 for more information.

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