

# SOUTHWESTERN NEWS

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## DEPRESSED PATIENTS DISSATISFIED WITH DRUG TREATMENT NEEDED FOR NEW STUDY

DALLAS – March 23, 1998 – Patients who take some types of antidepressants often improve but may reach a plateau. A depression expert at UT Southwestern Medical Center at Dallas is hoping that he can help these patients improve by trying a different drug, Remeron (mirtazipine).

Dr. Madhukar Trivedi, an assistant professor of psychiatry, and his associates are recruiting patients who have not improved substantially on selective serotonin reuptake inhibitors (SSRIs), such as Prozac, Paxil or Zoloft, or who are experiencing undesirable side effects. Their eight-week study will investigate optimal treatment and evaluate the effectiveness and tolerability of Remeron.

"With SSRI medication, as with all other antidepressant medications, someone might improve from a state of severe depression to a level of moderate depression" said Trivedi, director of the depression and anxiety disorders program at UT Southwestern. "But we want to see what will help that person move past that to a level closer to where they were before they became depressed."

This study reflects a trend in psychiatric research in which physicians fine tune treatment according to each patient's particular symptoms.

"All antidepressant medications are equally effective, however, any one medication leads to a full response in only 50 percent to 60 percent of patients," he said. "Patients then require a two- or three-step approach to depression treatment."

Patients may feel better when they begin medication, but they often level off;

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subsequently the depression is not completely resolved. Patients do not have to settle for treatment that is only partially effective, Trivedi said.

The study complies with the Texas Medication Algorithm Project (TMAP), which uses computerized medication-decision paths, or algorithms, to refine the treatment of patients with persistent mental illness. The popularity and initial success of the earliest antidepressants prompted a hit-or-miss, less-individualized therapeutic schedule, Trivedi said.

Remeron, a Food and Drug Administration-approved antidepressant, differs from the SSRIs in terms of side effects. Most antidepressants take six to eight weeks to start working, but Remeron seems to be effective much more quickly and is approximately 50 percent to 60 percent effective. Patients on Remeron do not typically experience sexual dysfunction, anxiety and nausea — side effects commonly reported by those taking SSRIs.

Eligible study participants must be at least 18 years old, have a primary diagnosis of depression and must be currently taking Prozac, Paxil or Zoloft. For more information, call Shannon Baker at (214) 648-4231.

Remeron is manufactured by Organon, Inc.

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