

Poster presentation

## Add-on quetiapine for bipolar depression: twelve months open label prospective trial

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### Background

Bipolar Disorder is a disabling and often chronic condition. While at least one third of the time patients are depressed, they do not always respond well to conventional mood stabilizers. Attempts to treat them with antidepressants can provoke a switch to mania or increase the cycling pattern. With increasing number of reports suggesting that atypical antipsychotics may offer therapeutic benefits, this study examines the long-term role of Quetiapine, added on the usual treatment in patients with Bipolar Depression.

### Materials and methods

An open label trial to assess the long-term response of patients with bipolar depression to Quetiapine added to their usual treatment. Inclusion criteria were Bipolar Disorder type 1 or 2 as defined by DSM-IV, age over 18, currently depressed (HAM-D > 18), no change of antidepressants for at least 3 weeks. Quetiapine was added open label and the dose attempted to reach at least 300 mg per day, but lower doses were allowed, if clinically appropriate. Outcome measures were HAM-D, YMRS, CGI and AIMS at base and then monthly for twelve months.

### Results

Nineteen patients were enrolled in this study, 6 males and 13 females. Seven patients completed the full twelve months. Data for 17 patients (Last Observation Carried Forward, LOCF) at twelve months: HAM-D21 reduced from 27.2 to 12.7, and CGI from 4.7 to 2.7. Only two patients discontinued due to side effects.

### Discussion

Quetiapine seems to be effective and well tolerated in patients with Bipolar Depression when added to their usual treatment, and can be considered as a viable option.