

Oral presentation

Agitated and mixed depression

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Psychic and motor agitation, racing or crowded thoughts, irritability or unprovoked feelings of rage, talkativeness, mood lability and early insomnia are clearly symptoms of nervous excitability and when they are mixed in the picture of a major depressive episode, they constitute a mixed depressive episode. Psychomotor and psychic agitation are equally important for the diagnosis. The adverse response of these states to antidepressant drugs, above all the increase of agitation and of suicidality, makes a clear distinction between simple and mixed depression necessary and urgent. The suicidality induced by antidepressants is related to manifest or latent agitation. Latent agitated depression will be introduced. In mixed depression, treatment should initiate with anti-psychotics, anti-epileptics, lithium and benzodiazepines and when agitation has subsided, and if simple depression persists, antidepressants may be used cautiously. Electroconvulsive therapy is very effective throughout the course of agitated depression.