

MEETING ABSTRACT

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Use of mood stabilizer drugs in the treatment of major depressive dissorder in an outpatient mental health center

Carolina Garnier*, Juan Castaño, Patricia Alvaro, Rosa Sanchis, David Corcoles, Francisco Portillo, Belen Diaz, Luis Miguel Martin, Antoni Bulbena

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Background

Major depressive disorder (MDD) is a common and disabling psychiatric condition. Antidepressants are currently the mainstay of treatment for depression; however, almost two thirds of patients will fail to achieve remission with initial treatment, as a result, a range of augmentation and combination strategies have been used [1].

Materials and methods

Major depressive disorder (MDD) is a common and disabling psychiatric condition. Antidepressants are currently the mainstay of treatment for depression; however, almost two thirds of patients will fail to achieve remission with initial treatment, as a result, a range of augmentation and combination strategies have been used [1].

Results

Mood stabilizers are used in 14% of the sample with a predominancy in the female gender (85.7%), a global average age 50.6 ± 12.2 years. Regarding personal psychiatric background, there's an absence of these in the first place (64.3%), followed by the presence of previous depressive episodes (21.4%) and dysthymic disorder (7.1%). In none of these cases there was toxic abuse. There is a predominancy in the absence of previous psychiatric hospitalisations (64.3%).

The frequencies of use of mood stabilizers was: topiramate in the first place (50%) followed by lithium, carbamazepine and pregabaline (14.28% each of them), in the

last place lamotrigine (7.1%). The average dose was 900 mg/d for carbamazepine, 600 mg/d for lithium, 300 mg/d for pregabaline, 128.5 mg/d for topiramate and 100 mg/d for lamotrigine.

Conclusions

In our sample the frequency of use of lithium is similar to the registered for the several antiepiletics (lithium, carbamazepine and pregabaline: 14.28% each one). However, lithium addition is recommended as a first choice for depressed patients who do not respond to therapy with conventional antidepressants [2].

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Department of Psychiatry, Hospital del Mar, IAPS, Barcelona, Spain

