

# Study of lymphocyte neurotransmitter markers in depression and anxiety

**Submission date**  
31/01/2008

**Recruitment status**  
No longer recruiting

☐ Prospectively registered

☐ Protocol

**Registration date**  
27/06/2008

**Overall study status**  
Completed

☐ Statistical analysis plan

☒ Results

**Last Edited**  
11/06/2019

**Condition category**  
Mental and Behavioural Disorders

☐ Individual participant data

## Plain English summary of protocol

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

Dr Lucimey Lima

### Contact details

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## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

FONACIT G-1387

# Study information

## Scientific Title

A randomised study on the antidepressive effect of fluoxetine and folic acid, as possible augmenter, and the SYNThesis of serotonin (5-HT) in lymphocytes prior and after treatment

## Acronym

5HTSYNT

## Study objectives

The administration of folic acid plus the antidepressant fluoxetine to patients with major depression could augment the response to the antidepressant, and also modify the content, the synthesis of serotonin, neurotransmitter and immunomodulator, and the presence of tryptophan hydroxylase in lymphocytes, and then influence functionality

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

This trial was part of a project "Nervous System Markers in Lymphocytes of Patients with Major Depression or Generalized Anxiety." This project received approval from three ethics committees:

1. Ethic Committees of the Venezuelan Institute of Scientific Investigations (Instituto Venezolano de Investigaciones Científicas; IVIC). Approved in 2000
2. Caracas Hospital (Hospital Vargas de Caracas; VHC). Approved in 2001
3. The National Fund of Scientific Technology and Innovation (FONACIT; <http://www.fonacit.gov.ve>). Approved in 2001

## Study design

Randomised controlled trial

## Primary study design

Interventional

## Secondary study design

Randomised controlled trial

## Study setting(s)

Not specified

## Study type(s)

Treatment

## Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

## Health condition(s) or problem(s) studied

Major depression

## **Interventions**

As of 22/07/2008, information on the dose and route of administration for each drug /supplement were added to the interventions:

This trial consists of two studies:

Study 1: Fluoxetine (oral) 20 mg/day plus placebo (30 participants) vs fluoxetine (oral) 20 mg/day plus omega-3 (oral) 900 mg/day (30 participants)

Study 2: Fluoxetine (oral) 20 mg/day plus placebo (30 participants) vs fluoxetine (oral) 20 mg/day plus folic acid (oral) 10 mg/day (30 participants)

Total number of participants =  $30 \times 4 = 120$

Interventions provided at time of registration:

This trial consists of two studies:

Study 1: Fluoxetine plus placebo (30 participants) vs fluoxetine plus omega-3 (30 participants)

Study 2: Fluoxetine plus placebo (30 participants) vs fluoxetine plus folic acid (30 participants)

Total number of participants =  $30 \times 4 = 120$  participants.

## **Intervention Type**

Drug

## **Phase**

Not Specified

## **Drug/device/biological/vaccine name(s)**

fluoxetine and folic acid

## **Primary outcome measure**

1. Response to differential treatment at 2, 4 and 6 weeks
2. Magnitude of the response at 2, 4 and 6 weeks
3. Biochemical analyses on blood samples at 0 and 6 weeks:
  - 3.1. Neurotransmitters in plasma
  - 3.2. Isolation of lymphocytes
  - 3.3. Neurotransmitters in lymphocytes
  - 3.4. Detection of tryptophan hydroxylase
  - 3.5. Folate levels
  - 3.6. Homocysteine levels
  - 3.7. Vitamin B12 levels
4. In participants who took omega-3, brain-derived neurotrophic factor (BDNF) in serum and lymphocytes will be determined

## **Secondary outcome measures**

Correlation between response to antidepressant and biochemical measurements

## **Overall study start date**

01/12/2006

## **Completion date**

29/02/2008

# Eligibility

## Key inclusion criteria

1. Both males and females
2. 18 to 60 years
3. Major depression episode, according to the Diagnostic and Statistical Manual of Mental Disorders, 4th edition (DSM-IV) criteria
4. Without psychotic symptoms
5. Mild and moderate
6. Without risks of suicide
7. Without another psychiatric disorder
8. Without another medical illness
9. Free of pharmacological treatment for one month prior to inclusion into the study

## Participant type(s)

Patient

## Age group

Adult

## Lower age limit

18 Years

## Sex

Both

## Target number of participants

120

## Total final enrolment

27

## Key exclusion criteria

1. Pregnancy
2. Surgery
3. Adverse effect to treatments
4. Allergies, infections, inflammation
5. Excessive consumption of coffee, tea, tobacco or alcohol

## Date of first enrolment

01/12/2006

## Date of final enrolment

29/02/2008

# Locations

## Countries of recruitment

Venezuela

**Study participating centre**  
**Laboratorio de Neuroquímica**  
Caracas  
Venezuela  
1020-A

## **Sponsor information**

### **Organisation**

Venezuelan Institute of Scientific Investigations (Instituto Venezolano de Investigaciones Científicas) (Venezuela)

### **Sponsor details**

c/o Dr Lucimey Lima  
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### **Sponsor type**

Research organisation

### **Website**

<http://www.ivic.ve>

### **ROR**

<https://ror.org/02ntheh91>

## **Funder(s)**

### **Funder type**

Government

### **Funder Name**

The National Fund of Scientific Technology and Innovation (FONACIT; ref: G-1387) (Venezuela)

### **Funder Name**

## Results and Publications

### Publication and dissemination plan

Not provided at time of registration

### Intention to publish date

### Individual participant data (IPD) sharing plan

### IPD sharing plan summary

Not provided at time of registration

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/07/2008	11/06/2019	Yes	No