Combination of pharmacotherapy with electroconvulsive therapy in prevention of relapse in major depressive disorder: a randomised, placebo controlled, double-blind study

Submission date	Recruitment status No longer recruiting	Prospectively registered		
28/03/2008		☐ Protocol		
Registration date 09/05/2008	Overall study status Completed	Statistical analysis plan		
		[X] Results		
Last Edited	Condition category	☐ Individual participant data		
13/04/2021	Mental and Behavioural Disorders			

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

AY0022

Study information

Scientific Title

A new strategy of continuation pharmacotherapy in the prevention of relapse following electroconvulsive therapy: a controlled trial

Study objectives

- 1. The frequency of relapse of depressive symptoms will be lower in the group with concomitant antidepressant treatment after the 4th electroconvulsive therapy (ECT) compared to the group taking placebo.
- 2. The frequency of relapse of depressive symptoms will be lower in the group with concomitant antidepressant treatment after the 4th ECT compared to the group taking antidepressant treatment after the 8th ECT.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved by the Dokuz Eylul University Institutional Review Board, Izmir, Turkey on 03/10/2002 (version 0.0). Amendments were approved on the following dates:

Version 0.1: 16/07/2003 Version 0.2: 03/10/2004

Study design

Randomised, double-blind, placebo-controlled, parallel-arms trial.

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Not specified

Study type(s)

Treatment

Participant information sheet

Health condition(s) or problem(s) studied

Major depressive disorder

Interventions

Consented subjects who met the inclusion and exclusion criteria were consulted by an anesthesian and cardiologist before starting ECT. Each subject received 8 effective bilateral ECT at a frequency of twice a week.

After completion of 4th ECT session, the participants were randomly allocated to the following three arms:

- 1. C-Pharm Early
- 2. C-Pharm Late
- 3. C-Pharm Placebo

Randomisation to C-Pharm Early: C-Pharm Late: C-Pharm Placebo groups was 2:2:1.

On the day of randomisation C-Pharm Early group was given sertraline hydrochloride (150 mg/day); C-Pharm Late group was first given identical placebo tablets, which was then substituted with sertraline hydrochloride (150 mg/day) after the completion of the 8th ECT. C-Pharm Placebo group was administered identical placebo tablets throughout the interventions.

Participants were evaluated weekly during the first 4 weeks, then biweekly by Montgomery-Asberg Depression Rating Scale (MADRS) throughout the study period. After the completion of the 8 ECTs, remitters in each study group were identified. To be defined as remitted, patients had to achieve a maximum score of 12 in MADRS.

Intervention Type

Drug

Phase

Not Specified

Drug/device/biological/vaccine name(s)

sertraline hydrochloride

Primary outcome measure

Rate of relapse. The criterion for relapse was a mean MADRS score of at least 16 that is maintained over 2 consecutive visits.

Secondary outcome measures

Estimated mean time to relapse.

Overall study start date

05/04/2004

Completion date

01/02/2007

Eligibility

Kev inclusion criteria

- 1. Be at least 18 years old, male and female
- 2. Diagnosis of major depressive disorder on the structural clinical interview for the Diagnostic and Statistical Manual of mental disorders fourth edition (DSM-IV)
- 3. Montgomery-Asberg Depression Rating Scale >22 at screening
- 4. Providing informed consent

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

46

Key exclusion criteria

- 1. Currently pregnant, planning to become pregnant, or breast feeding
- 2. History of bipolar disorder, schizophrenia, schizoaffective disorder, nonmood disorder psychosis, neurological illness
- 3. History of ECT within the past 6 months
- 4. Drug screen positive for any drug of abuse at screening, active substance abuse in the past 2 weeks or substance dependence in the past 2 months (except nicotine and caffeine)
- 5. Severe medical illness that markedly increases the risks of ECT (e.g. unstable or severe cardiovascular conditions, aneurysm or vascular malformation susceptible to rupture, severe chronic obstructive pulmonary disease)

Date of first enrolment

05/04/2004

Date of final enrolment

01/02/2007

Locations

Countries of recruitment

Türkiye

Study participating centre Seferihisar Cad No.6

Izmir Türkiye 35310

Sponsor information

Organisation

Individual sponsor (Turkey)

Sponsor details

Prof Aysegul Yildiz Seferihisar Cad No.6 Camli Villalari Sitesi Villa 14 Camli Koyu Guzelbahce Izmir Türkiye 35310

Sponsor type

Other

Funder(s)

Funder type

Industry

Funder Name

Investigator award from the Pfizer Pharmaceuticals (USA)

Funder Name

Dokuz Eylul University (Turkey)

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?
Results article		01/06/2010	13/04/2021	Yes	No