GENetic and clinical Predictors Of treatment response in Depression

Submission date Recruitment status [X] Prospectively registered 17/09/2003 No longer recruiting [X] Protocol [] Statistical analysis plan Registration date Overall study status 19/09/2003 Completed [X] Results Individual participant data **Last Edited** Condition category 27/09/2011 Mental and Behavioural Disorders

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

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Additional identifiers

Protocol serial number G0200243

Study information

Scientific Title

Acronym

GENPOD

Study objectives

We wish to identify genetic and clinical predictors of response to SSRIs and NaRIs in depressive illness. Hypotheses:

- 1. Those who are homozygous for the insertion allele polymorphism in the promoter region of the 5HT transporter who are allocated SSRIs will have an improved response compared to those on NaRIs. This also implies that those who are not homozygous will have reduced response on SSRIs compared to those on NaRIs.
- 2. Those who have more severe depressive disorders who are allocated NaRIs and less severe disorder allocated SSRIs will have a better response compared to the other two groups

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Randomised controlled trial

Primary study design

Interventional

Study type(s)

Not Specified

Health condition(s) or problem(s) studied

Mental and Behavioural Disorders

Interventions

- 1. Reboxetine 4mg bd
- 2. Paroxetine 20mg

Intervention Type

Drug

Phase

Not Specified

Drug/device/biological/vaccine name(s)

Reboxetine, Paroxetine

Primary outcome(s)

Beck depression inventory total score (BDI) at 6 weeks adjusted for baseline BDI score.

Key secondary outcome(s))

Not provided at time of registration

Completion date

22/05/2008

Eligibility

Key inclusion criteria

18-74 years with the more severe depressions in whom the GP and patient have already agreed that antidepressants should be prescribed. We will therefore only include those with a Clinical Interview Schedule - Revised (CIS-R) score of ≥20, a Beck Depression Inventory (BDI) score of ≥15 and a diagnosis of International Statistical Classification of Diseases and Related Health Problems, tenth revision (ICD-10) depressive episode F32 and F33 (from CIS-R).

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Upper age limit

74 years

Sex

Not Specified

Key exclusion criteria

Pregnant and breast feeding women, patients with psychotic illness, alchohol or substance abuse problems, patients with medical contraindications to Citalopram or Reboxetine. (June 2006: Exclusion criteria were provided as follows: Potential subjects who have taken antidepressant medication within 2 weeks, who cannot complete self-administered scales, who have a psychosis or major substance or alcohol abuse. The GP will exclude anyone who has medical contraindications or in whom participation in the trial is not appropriate.)

Date of first enrolment

23/02/2004

Date of final enrolment

22/05/2008

Locations

Countries of recruitment

United Kingdom

England

Study participating centre Division of Psychiatry Bristol United Kingdom BS6 6JL

Sponsor information

Organisation

Medical Research Council (UK)

Funder(s)

Funder type

Research council

Funder Name

Medical Research Council (MRC) (G0200243) (UK)

Alternative Name(s)

Medical Research Council (United Kingdom), UK Medical Research Council, MRC

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

Results and Publications

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	results	01/06/2011		Yes	No
Protocol article	protocol	22/05/2008		Yes	No