Pharmacological treatment of psychotic depression

Submission date	Recruitment status	Prospectively registered
16/05/2005	No longer recruiting	[] Protocol
Registration date	Overall study status	[_] Statistical analysis plan
16/05/2005	Completed	[] Results
Last Edited	Condition category	Individual participant data
02/04/2008	Mental and Behavioural Disorders	[] Record updated in last year

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s) Scientific

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Contact details

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers NTR26

Study information

Scientific Title

Acronym

DUDG (Dutch University Depression Group)

Study objectives

Primary hypothesis:

To compare in in-patients with psychotic depression the anti-depressive efficacy at seven weeks of three treatment arms:

1. Seven weeks venlafaxine (maximum dose 375 mg)

2. Seven weeks imipramine (dose adjustment to adequate plasma levels of 200 - 300 μ g/l)

3. Seven weeks venlafaxine (maximum dose 375 mg) plus quetiapine (maximum 600 mg/day)

Secondary hypotheses:

1. To compare in patients with psychotic depression the tolerability of venlafaxine, imipramine and venlafaxine plus quetiapine

2. To find factors modifying treatment efficacy, such as response to earlier treatments during current episode

3. To evaluate efficacy and tolerability of continuation treatment during four months in responders to treatment at seven weeks

Ethics approval required

Old ethics approval format

Ethics approval(s)

Ethics approval received from the local medical ethics committee

Study design

Randomised, double-blind, active-controlled, parallel, multi-centre trial

Primary study design Interventional

Secondary study design Randomised controlled trial

Study setting(s) Hospital

Study type(s) Treatment

Participant information sheet

Health condition(s) or problem(s) studied In-patients with psychotic depression

Interventions

Trial treatments:

- 1. Venlafaxine (maximum dose 375 mg)
- 2. Imipramine (dose adjustment to adequate plasma levels of 200 300 µg/l)
- 3. Venlafaxine (maximum dose 375 mg) plus quetiapine (max 600 mg/day)

Duration of treatment: one week wash-out and seven weeks acute treatment with venlafaxine or imipramine or venlafaxine plus quetiapine. Total: eight weeks.

Intervention Type

Drug

Phase Not Specified

Drug/device/biological/vaccine name(s)

Venlafaxine, imipramine, quetiapine

Primary outcome measure

Proportion of responders.

Secondary outcome measures

- 1. Change in:
- 1.1. HRSD scores
- 1.2. Clinical Global Impressions (CGI) scale
- 2. Time to response
- 3. Adverse effects

4. Group differences, especially with regard to response to earlier treatments during current episode

Overall study start date

01/03/2002

Completion date

01/07/2007

Eligibility

Key inclusion criteria

 Aged 18 - 65 years
Major depressive disorder, single or recurrent episode, with psychotic features (Diagnostic and Statistical Manual of Mental Disorders, fourth edition [DSM-IV])
Hamilton Rating Scale for Depression (HRSD) (17 item)
Written informed consent

Participant type(s) Patient

Age group Adult **Lower age limit** 18 Years

Sex Both

Target number of participants

160

Key exclusion criteria

Any of the following is regarded as a criterion for exclusion from the trial:

- 1. Bipolar I or II disorder
- 2. Schizophrenia or other primary psychotic disorder
- 3. Treatment of current episode with adequate trial of imipramine or venlafaxine:
- 3.1. Imipramine at least four weeks with adequate blood levels
- 3.2. Venlafaxine at least four weeks 300 mg dd
- 4. Drug/alcohol dependence in the last three months
- 5. Mental retardation (intelligent quotient [IQ] less than 80)

6. Women:

6.1. Pregnancy or possibility for pregnancy and no adequate contraceptive measures

6.2. Breast-feeding

7. Serious medical illness affecting central nervous system (CNS) e.g. Parkinson's Disease, systemic lupus erythematosus (SLE), brain tumour, cerebrovascular accident (CVA)

8. Relevant medical illness as contra-indications for the use of study medication, such as recent myocardial infarction

9. Medication affecting CNS, e.g. anti-depressives and/or anti-psychotics other than study medication, steroids (prednisone), mood stabilisers, benzodiazepines (if not being tapered): greater than 3 mg lorazepam (or equivalent)

10. Direct electroconvulsive therapy (ECT) indication (e.g. very severe suicidality or refusal of food and drinking resulting in a life threatening situation)

11. Monoamine oxidase inhibitor (MAO-I) less than one week before start of medication free period

Date of first enrolment

01/03/2002

Date of final enrolment 01/07/2007

Locations

Countries of recruitment Netherlands

Study participating centre

University Medical Center Utrecht (UMCU) Utrecht Netherlands 3508 GA

Sponsor information

Organisation

University Medical Center Utrecht (UMCU) (The Netherlands)

Sponsor details

Julius Center for Health Sciences and Primary Care P.O. Box 85500 Utrecht Netherlands 3508 GA +31 (0)30 2509358 juliuscenter@azu.nl

Sponsor type University/education

Website http://www.umcutrecht.nl/zorg/

ROR https://ror.org/0575yy874

Funder(s)

Funder type Industry

Funder Name

Wyeth Pharmaceuticals B.V. (The Netherlands)

Funder Name AstraZeneca (The Netherlands)

Alternative Name(s) AstraZeneca PLC, Pearl Therapeutics

Funding Body Type Government organisation

Funding Body Subtype

For-profit companies (industry)

Location United Kingdom

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