

# Pharmacological treatment of psychotic depression

<b>Submission date</b> 16/05/2005	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
<b>Registration date</b> 16/05/2005	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
<b>Last Edited</b> 02/04/2008	<b>Condition category</b> Mental and Behavioural Disorders	<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> 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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## 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 µg/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

1. Aged 18 - 65 years
2. Major depressive disorder, single or recurrent episode, with psychotic features (Diagnostic and Statistical Manual of Mental Disorders, fourth edition [DSM-IV])
3. Hamilton Rating Scale for Depression (HRSD) (17 item)
4. 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

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# Sponsor information

## Organisation

University Medical Center Utrecht (UMCU) (The Netherlands)

## Sponsor details

Julius Center for Health Sciences and Primary Care

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## 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