REmission MEchanisms in Depression

Submission date	Recruitment status No longer recruiting	Prospectively registered		
29/04/2010		☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
29/04/2010	Completed	[X] Results		
Last Edited	Condition category	Individual participant data		
26/11/2019	Mental and Behavioural Disorders			

Plain English summary of protocol

Not provided at time of registration

Study website

http://www.remedistudy.co.uk

Contact information

Type(s)

Scientific

Contact name

Prof Ian Anderson

Contact details

Neuroscience and Psychiatry Unit Room G704 Stopford Building, Stopford Building Oxford Road Manchester United Kingdom M13 9PT

Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

4357

Study information

Scientific Title

REmission MEchanisms in Depression

Acronym

REMEDI

Study objectives

We will recruit 48 unmedicated depressed participants aged 18 - 55 years with a Diagnostic and Statistical Manual of Mental Disorders, 4th Edition (DSM-IV) major depressive episode and 24 age and sex matched controls. Depressed participants will be scanned using magnetic resonance imaging, before and after administration of 8 weeks treatment with daily citalopram (20 mg, increasing to 40 mg at week 4 if necessary). Half of the controls will be retested after 8 weeks but receive no treatment. Also, prior to oral administration of citalopram, depressed participants will be randomised to receive citalopram or saline infusion in the scanning protocol. Depressed participants will be treated by the clinical research fellow and monitored for treatment response, side effects and suicidal risk by face-to-face appointments at 2, 4, 6 and 8 weeks and by phone interviews at 1, 3 and 5 weeks.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Stockport LREC approved on the 3rd December 2007

Study design

Randomised interventional treatment trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

GP practice

Study type(s)

Treatment

Participant information sheet

Health condition(s) or problem(s) studied

Topic: Mental Health Research Network, Primary Care Research Network for England; Subtopic: Depression, Not Assigned; Disease: Depression, All Diseases

Interventions

8 week treatment with citalopram 20 - 40 mg, citalopram pharmacoMRI. Patients are randomised to citalopram infusion (7.5 mg) versus saline during fMRI scanning at baseline in a 3:1 ratio.

Follow up length: 2 months Study entry: registration only

Intervention Type

Drug

Phase

Not Specified

Drug/device/biological/vaccine name(s)

Citalopram

Primary outcome measure

Baseline neuronal responses predicting outcome a 8 weeks

Secondary outcome measures

- 1. Montgomery Asberg Depression Rating Scale (MADRS), measured at baseline and 8 weeks
- 2. Neuronal responses to emotional processing tasks using fMRI, measured at baseline and 8 weeks depressed patients versus controls

Overall study start date

01/04/2008

Completion date

31/05/2010

Eligibility

Key inclusion criteria

Depressed subjects:

- 1. DSM-IV major depressive episode with a Montgomery Asberg Depression Rating Scale (MADRS) score greater than 20
- 2. Psychotropic drug-free for greater than 2 weeks (2 months for fluoxetine)

Controls:

3. Psychiatrically well

All:

- 4. Good physical health
- 5. Aged 18 55 years, either sex

Participant type(s)

Mixed

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

Planned Sample Size: 72; UK Sample Size: 72

Key exclusion criteria

Depressed subjects:

- 1. Duration of depressive episode greater than 1 year or depression superimposed on dysthymia
- 2. Failure to respond to 2 antidepressants given for 6 weeks at an adequate dose in current episode
- 3. Failure to respond to citalogram or escitalogram in current episode
- 4. Allergy or intolerance to citalopram or escitalopram
- 5. Contraindications to selective serotonin reuptake inhibitor (SSRI) treatment (e.g., history of peptic ulcer/gasterointestinal [GI] bleeding or taking non-steroidal anti-inflammatory drugs [NSAIDs], in the absence of concurrent ulcer-protective treatment)
- 6. Other concurrent psychotropic medication except for small stable doses of short acting hypnotics
- 7. Electroconvulsive therapy (ECT) or lithium in current episode
- 8. Significant suicidal risk or likely need for other psychiatric intervention during the study period
- 9. Other current co-morbid Axis I psychiatric disorders except anxiety disorders (excluding OCD) secondary to depression
- 10. Primary cluster A or B Axis II (personality) disorder
- 11. History of psychotic, bipolar or organic psychiatric disorder

Controls:

- 12. Personal psychiatric history including Axis II (personality) disorder
- 13. Significant family psychiatric history (eg psychosis, recurrent affective disorder)
- 14. Psychotropic medication

All:

- 15. Medical condition that might compromise subject safety or interfere with interpretation of results
- 16. History of significant head trauma (loss of consciousness greater than 5 minutes)
- 17. Current medication for a medical condition that would compromise subject safety or interfere with interpretation of results in the judgement of the investigator (e.g., possible exceptions intermittent analgesics, contraceptive pill, occasional inhaler for mild asthma)
- 18. Subjects whose English is insufficiently good to enable them to validly complete the questionnaires or perform simple computer-based tasks
- 19. Pregnancy or no effective contraception in women of childbearing age
- 20. Any illicit drug use in the last 2 months and a lifetime history of a DSM-IV substance or alcohol misuse disorder
- 21. Current Alcohol use above 14 units/week for women and 21 units/week for men
- 22. Excessive caffeine use (greater than 6 cups of coffee/day)
- 23. Smoking greater than 10 cigarettes/day
- 24. Contraindications to scanning (determined by standard screening instrument)
- 25. Likely not to be able to complete the full study for any reason

Date of first enrolment

01/04/2008

Date of final enrolment

31/05/2010

Locations

Countries of recruitment

England

M13 9PT

United Kingdom

Study participating centre
Neuroscience and Psychiatry Unit
Manchester
United Kingdom

Sponsor information

Organisation

University of Manchester (UK)

Sponsor details

Oxford Road Manchester England United Kingdom M13 9PL

Sponsor type

University/education

Website

http://www.manchester.ac.uk/

ROR

https://ror.org/027m9bs27

Funder(s)

Funder type

Research council

Funder Name

Medical Research Council (MRC) (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

Publication and dissemination plan

PhD thesis:

Arnone D (2011) Imaging structure and function in recovery from depression. Awarded by the University of Manchester for the degree of PhD in the Faculty of Medical and Human Sciences

Intention to publish date

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are available upon request from Prof. Emeritus Ian M Anderson (ian.anderson@manchester.ac.uk) in an anonymised form and in keeping with MRC data sharing guidance.

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/08/2012	26/11/2019	Yes	No
Results article	results	15/03/2019	26/11/2019	Yes	No
Results article	results	01/09/2009	26/11/2019	Yes	No
Results article	results	01/12/2013	26/11/2019	Yes	No
Results article	results	01/09/2009	26/11/2019	Yes	No