

# Pharmacological treatment of depression

<b>Submission date</b> 28/04/2006	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
<b>Registration date</b> 28/04/2006	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 26/03/2018	<b>Condition category</b> Mental and Behavioural Disorders	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

## Study information

**Scientific Title**  
Pharmacological treatment of depression

**Acronym**  
Venla study

**Study objectives**

1. Imipramine and Venlafaxine are comparable in efficacy in inpatients with a major depression
2. Imipramine and Venlafaxine are comparable in tolerability
3. Patients with a Venlafaxine plasma level <195 µg/l show comparable antidepressant efficacy as patients with a Venlafaxine plasma level >195 µg/l
4. Imipramine and Venlafaxine are comparable in efficacy during 4 months follow-up
5. Imipramine and Venlafaxine are comparable in tolerability during 4 months follow-up

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

Ethics approval received from the local medical ethics committee

**Study design**

Double-blind randomized single-centre study with a washout period comparing 2 treatment strategies

**Primary study design**

Interventional

**Study type(s)**

Treatment

**Health condition(s) or problem(s) studied**

Depression

**Interventions**

1. Venlafaxine (maximum dose 375 mg)
2. Imipramine (dose adjustment to adequate plasma levels of 200-300 µg/l)

**Intervention Type**

Drug

**Phase**

Not Applicable

**Drug/device/biological/vaccine name(s)**

Imipramine, Venlafaxine

**Primary outcome(s)**

Change in HRSD scores.

**Key secondary outcome(s)**

1. Change in CGI scores
2. Response defined as >50% reduction on HRSD compared to baseline
3. Remission defined as an end score of <7 on the HRSD

**Completion date**

01/01/2008

# Eligibility

## Key inclusion criteria

For inclusion in the trial, patients must fulfill all of the following criteria:

1. Age 18-65
2. Major depressive disorder, single or recurrent episode (Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition [DSM-IV])
3. Hamilton Rating Scale for Depression (HRSD) (17 item)  $\geq 14$
4. Written informed consent

## Participant type(s)

Patient

## Healthy volunteers allowed

No

## Age group

Adult

## Lower age limit

18 years

## Upper age limit

65 years

## Sex

All

## Key exclusion criteria

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

1. Patients who are incapable of understanding the information and of giving informed consent. Also, patients who are unable to read or write
2. Major depression with psychotic features (separate study)
3. Bipolar I or II disorder
4. Schizophrenia or other primary psychotic disorder
5. Treatment of current episode with adequate trial of Imipramine or Venlafaxine
6. Drug/alcohol dependence in the last 3 months
7. Mental retardation (IQ <80)
8. Women: pregnancy or possibility for pregnancy and no adequate contraceptive measures. Breastfeeding.
9. Serious medical illness affecting central nervous system (CNS) e.g. M. Parkinson, systemic lupus erythematosus (SLE), brain tumor, cerebrovascular accident (CVA)
10. Relevant medical illness as contra-indications for the use of study medication (Venlafaxine and Imipramine), such as recent myocardial infarction and severe liver or kidney failure
11. Medication affecting CNS e.g. antidepressants and/or antipsychotics other than study medication, steroids (prednisone), mood stabilisers, benzodiazepines (if not being tapered): >3 mg lorazepam (or equivalent)
12. Direct electroconvulsive therapy (ECT) indication (e.g. very severely suicidal or refusal of food and drinking resulting in life threatening situation)
13. Contra-indications for Lithium (Moleman, 1998):

- 13.1. Kidney failure
- 13.2. Acute myocardial infarction
- 13.3. Myasthenia gravis
- 13.4. Breastfeeding

**Date of first enrolment**

01/06/2004

**Date of final enrolment**

01/01/2008

## **Locations**

**Countries of recruitment**

Netherlands

**Study participating centre**

**Erasmus Medical Center**

Rotterdam

Netherlands

3000 CA

## **Sponsor information**

**Organisation**

Erasmus Medical Center (The Netherlands)

**ROR**

<https://ror.org/018906e22>

## **Funder(s)**

**Funder type**

Industry

**Funder Name**

Wyeth

**Alternative Name(s)**

**Funding Body Type**

Private sector organisation

## Funding Body Subtype

For-profit companies (industry)

## Location

United States of America

# 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?
<a href="#">Results article</a>	results	01/07/2017		Yes	No