

## PW01-01 - TREATMENT OF ATYPICAL DEPRESSION: POST-HOC ANALYSIS OF A RCT TESTING THE EFFICACY OF SERTRALINE AND CBT IN PRIMARY CARE PATIENTS

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**Objectives:** Atypical features are common among depressed primary care patients, but clinical trials testing the efficacy of psychopharmacological and/or psychotherapeutic treatment are lacking. This paper examines the efficacy of sertraline and cognitive behavioural therapy (CBT) among depressed patients with atypical features.

**Methods:** Analyses involve a double-blind comparison of sertraline versus placebo (N=47) and a single-blind comparison between CBT versus a guided self-help group (GSG) (N=48), with primary efficacy endpoints being the Inventory of Depressive Symptomatology (IDS<sub>C</sub>) and Hamilton Depression Scale (HAMD-17).

**Results:** In intent-to-treat (ITT) analyses, the decrease on the IDS<sub>C</sub> scale (and HAMD-17) was greater after CBT compared to GSG:  $p=0.01$  (HAMD-17:  $p=0.01$ ). The difference between SSRI versus placebo was not significant:  $p=0.22$  (HAMD-17:  $p=0.36$ ). At endpoint, the CBT versus GSG difference in mean change from baseline IDS<sub>C</sub> scores was 7.69 points (HAMD-17: 4.97 points), the sertraline versus placebo difference was 3.07 points (HAMD-17: 0.59 points).

**Conclusions:** The data provide a preliminary suggestion that the mix of patients with minor or mild major depression with atypical features may not be best treated with an SSRI, but that these conditions might be amenable to CBT. Although SSRI were not superior to placebo, it would be premature to rule out SSRI as efficacious in atypical depression.