
TREATMENT PATTERNS IN ASIAN PATIENTS WITH A MAJOR DEPRESSIVE EPISODE

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Introduction: The analysis of medication discontinuation may allow the comparison of the effectiveness of different medications and may help us understand treatment patterns in depression. Clinical guidelines recommend at least six months of antidepressant maintenance treatment for major depressive disorder (MDD).

Objectives: To determine the duration of antidepressant treatment in Asian patients treated with antidepressants for a major depressive episode and to understand the reasons and factors associated with discontinuation.

Methods: Nine hundred and nine in- and out-patients from Asia, of which 569 started an antidepressant medication at the baseline visit, presenting with a new or first episode of MDD were enrolled in a 3-month prospective observational study. The Kaplan-Meier method and Cox models were used to estimate discontinuation rates and factors associated with discontinuation. Survival analysis with competing risks was used to analyze the influence of different reasons for discontinuation.

Results: Of the 569 patients included in the study, 430 (75.6%) were evaluated at three months and analyzed. Of them, 242 (56%) discontinued the treatment during the three months follow-up and 188 maintained it. Of the overall sample, half of the patients discontinued the medication within 70 days. The most frequent reason for discontinuation was inadequate response (n=155, 64%), followed by adequate response (n=62, 26%). A relatively high proportion of patients with adequate response (30% at 130 days) discontinued the medication. Country and type of antidepressant were associated with medication discontinuation.

Conclusions: Medication discontinuation in Asian patients with depression is high, even for patients who respond adequately to treatment.