

Role of Sertraline in Post TBI Depression and Quality of Life in Traumatic Brain Injury

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Introduction: TBI is a major cause of disability. Depression is one of the major sequelae of TBI in both inpatient and outpatient populations. Depression is associated with numerous negative outcomes, thus affecting QOL adversely in these patients. Addressing depression in the treatment regimen of TBI may improve QOL of these patients.

Objective: Present study is designed to evaluate the role of sertraline in post TBI depression and its impact on QOL.

Methodology: Eighty male patients with post TBI depression were included in the study amongst the 250 male patients of mild to moderate TBI recruited for evaluation. Half of the patients were given sertraline 50 mg PO whereas the other half served as control without sertraline treatment. Participants were assessed on GCS, PHQ-9 and WHOQOL at regular intervals till the end of 6 months.

Result: Depression was found in 35.6% of total patients recruited. Most of the patients (63.1%) were below 35 years of age. Depression was more common in mild TBI cases than those with moderate TBI (53.7% v/s 46.25%, $p=0.04$). Left side brain injury (56.25%) with cerebral contusions was more commonly associated with depression ($p=0.04$). Patients in the sertraline group responded well to treatment with significant improvement in mood symptoms (PHQ-9 score 14.88 ± 3.603 v/s 5.33 ± 2.98 , $p=0.04$). All the four domains of QOL improved significantly in the sertraline group than the control group with sertraline treatment.

Conclusion: Management of TBI must focus on treatment of associated mood symptoms which is likely to be associated with poor QOL. Sertraline is effective in the treatment of depression with significant improvement in QOL in TBI patients.