

PW01-42 - ESCITALOPRAM IN TREATMENT OF DISABILITY IN MAJOR DEPRESSIVE PATIENTS

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Major depressive disorder (MDD) is a common, and often severe affective disorder which causes significant psychological distress, reduces quality of life and incised suicidal risk and mortality. Neurobiological basis of MDD involves at first serotonergic and noradrenergic neuronal systems. Escitalopram is highly potent and highly selective serotonin re-uptake inhibitor.

Purpose of this study was to: Estimate efficacy of the escitalopram in treatment of disability and impairment in social, professional and family life in patients with MDD.

Methods: This prospective clinical study included 110 patients with MDD diagnosed by ICD-10 criteria for MDD, who are randomly divided into control (40 patients) and experimental group (70 patients). Antidepressants were tested, for 6 months in hospital and outpatients conditions, according to specially designed protocol, which included Hamilton Depression Rating Scale (HAMD) and Sheehan Disability Scale (SDS). Control group was treated with mianserine (30-90 mg/24h) and experimental group was treated with escitalopram (10-20 mg/24h).

Results: Escitalopram therapy influenced on HAMD score with high statistical significance vs. Mianserine, $p=0.000$. Escitalopram therapy improves all SDS scores after 6 months in comparison to Mianserine therapy with high statistical significance in Social life $p=0.000$, Family life/home responsibilities $p=0.000$, Days lost $p=0.036$ and Days unproductive $p=0.003$. Percentage of adverse effects is significantly lower in Escitalopram (10.76%) than in Mianserine (26.67%) group.

Conclusion: Escitalopram has significantly better efficacy in treatment of MDD and disability and impairment in MDD patients comparing to Mianserine, with significantly lower adverse effects rate.