

P02-71

SERUM CHOLESTEROL AND TREATMENT RESPONSE IN PATIENTS WITH DEPRESSIVE DISORDER

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Introduction: The previous studies reported that elevated serum cholesterol levels (≥ 200 mg/dl) were associated with poorer response to fluoxetine and nortriptyline treatment in patients with depression.

Aims: The aim of this study was to examine the relationship between pretreatment serum cholesterol levels and clinical response to treatment with different antidepressants among inpatients with depressive disorder.

Methods: One hundred and four inpatients with depressive disorder who did not respond to previous treatment were enrolled in a six-week open study. New treatment (different antidepressant monotherapies, combinations or augmentations) was chosen according to clinical judgment. Serum cholesterol levels were obtained before starting new treatment. Cholesterol levels were classified as either elevated (≥ 200 mg/dl) or nonelevated. Clinical response was defined as $\geq 50\%$ decrease in the Montgomery Åsberg Depression Rating Scale (MADRS) score at endpoint compared to baseline.

Results: Forty-six patient (44%) were classified as having elevated cholesterol levels at baseline. Patients with elevated cholesterol levels did not significantly differ in gender ratio, baseline MADRS score, duration of current episode and number of previous episodes but were significantly older than patients with nonelevated cholesterol levels. After adjusting for age, gender, and Body Mass Index (BMI), we did not find significant differences in response rate and as well as in the pretreatment-posttreatment change in MADRS between patients with elevated cholesterol and patients with nonelevated levels.

Conclusion: We did not demonstrate association between pretreatment cholesterol level and response to treatment in depressive disorder.

Study was supported by the grant NS10368 IGA MZ CR.