A Precision Medicine Approach to Antidepressant Treatment in Depression



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Background

Every year in England over 800,000 patients present to their primary care physician with a new episode of depression.

Antidepressants are effective in treating depression but have a slow clinical onset of action, taking 4 to 6 weeks before changes in mood become apparent.

Many patients do not respond to the first medication prescribed and must try a series of different drugs, one after the other.

This often results in delays of many months before patients return to good mental health.

Antidepressant medication improves mood by causing patients to interpret emotional information in a more positive way (e.g. "the glass is half full rather than half empty").

The eHealth Emotional Test Battery (eH-ETB) is a set of computer-based tasks designed specifically to measure this change in processing of emotional information.

We assessed whether the eH-ETB could be used to predict, after only 7 days of treatment, whether a patient's mood would improve after 6 weeks of antidepressant treatment.

The ability to predict treatment response after only 7 days would significantly reduce the time to remission for depressed patients.

Methods

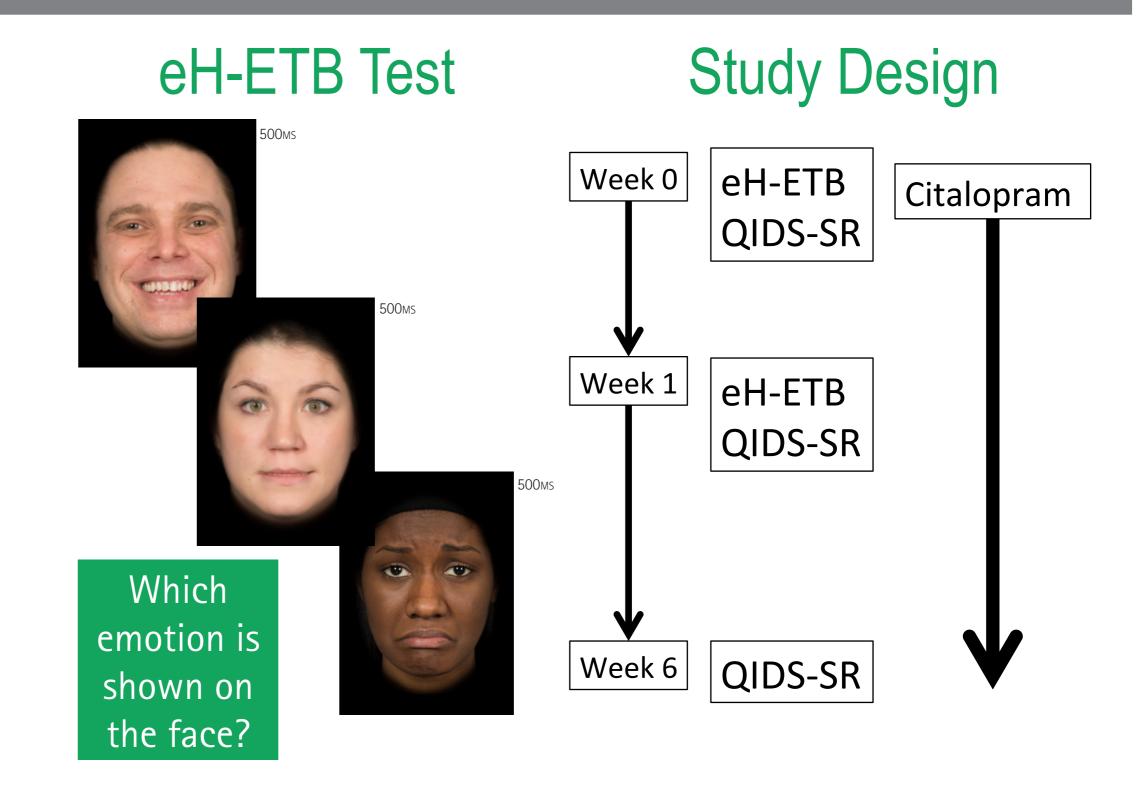
74 depressed patients were recruited from 10 primary care centres in England.

Patients completed the eH-ETB before starting the antidepressant citalogram and then again 7-9 days later.

Depressive symptoms were measured using the QIDS-SR questionnaire before treatment, at 7-9 days, and after 6 weeks of treatment.

eH-ETB and QIDS-SR scores from the baseline and day 7–9 were combined using a machine learning algorithm to predict whether the patient would respond to treatment at 6 weeks (treatment response = 50% reduction in QIDS-SR score from baseline to week 6).

Leave-one-out validation was used (feature selection and training on all but 1 sample, testing on left out sample).



Results

Data from 58 patients

Citalopram only improved mood in 37% of patients treated

	Patient Responded to Treatment	Patient Did Not Respond to Treatment
eH-ETB Predicted Patient Would Respond	1 - 2	5
eH-ETB Predicted Patient Would Not Respond		31

78% of patients with a negative eH-ETB test did not respond to treatment 72% of patients with a positive eH-ETB test did respond to treatment

Conclusion

Changes in emotional processing provide a sensitive prediction of response to citalopram in primary care patients.

The eH-ETB system shows considerable promise as a tool to improve the treatment of depression by reducing the time for the majority of patients to return to good mental health.