

CASE REPORT

Venlafaxine as an Augmentation of Electro- Convulsive Therapy in Treatment Resistant Depression- A Case Report

Abhinav Joshi¹

Author's Affiliations: ¹Medical Officer, Institute of Mental Health, Singapore

Correspondence: Dr. Abhinav Joshi, E-mail: drabhinavjoshi@gmail.com

ABSTRACT

Treatment of challenging cases of Depression with or without psychotic features often needs use of Electro-convulsive Therapy at some stage. The purpose of this case report is to demonstrate the effectiveness of augmentation of Electro-convulsive Therapy, in treatment of a case of Resistant Depression with antidepressant medication, Venlafaxine. Though further research is needed to confirm that with ongoing Electro-convulsive Therapy, changing the antidepressant classes, SSRI or NaSSA to Venlafaxine will improve the recovery rate.

Keywords: Treat resistant depression, Psychotic Depression, Electroconvulsive therapy in Depression, Venlafaxine in Treatment Resistant Depression.

INTRODUCTION

Treatment Resistant Depression has always been a challenge for the Mental Health Providers. Treatment Resistant Depression can be defined as an inadequate response to at least one antidepressant trial of adequate doses and duration. In this case we attempt to describe a patient who was unresponsive to maximum dosage of antidepressant and was started on Electro Convulsive Therapy, but without an expected response. Then we see how starting Venlafaxine actually made her recovery faster.

CASE REPORT

A 62 year old Indian Lady, she was brought by her family for change in her behaviour for the past few months. She had become socially withdrawn, was refusing food and had a clingy behaviour towards her family. At times she would get aggressive and physically hit her sister. In January 2013, her family noticed that she was refusing food, water and her medications. Her family pointed out her symptoms to a few events, when she was following up with a doctor for Hyponatremia and was scolded by the doctor a few times that she would die if she does not reduce her water intake. She was reviewed by a Psychiatrist and was started on Mirtazapine. According to the family she responded well to Mirtazapine. But the family defaulted treatment, until she started getting worse.

After her admission, she was noticed to be scared of strangers and wanted her family members to be on

her side all the time. She denied any persecutory ideations or suspiciousness towards the strangers. She was noticed to be crying most of the time and was not forthcoming about what was stressing her. She was started on Mirtazapine which was up-titrated over the course of one month to 45 mg/day. She was also started on Quetiapine 200mg/day. In consideration of her poor response to medications, she was started on Electro Convulsive Therapy. But even after six sessions of Electro Convulsive Therapy she was not responding as was expected. So Mirtazapine was stopped and she was started on Venlafaxine up-titrated to 150mg/day, while the Electro Convulsive Therapy was on. She started responding to this treatment and was discharged stable after 10 sessions of Electro Convulsive Therapy and within 15 days of starting Venlafaxine.

DISCUSSION

Anti-depressant – ECT combination was found to be more effective than medication or ECT alone. Similarly ECT was needed in the above mentioned case as the patient was refusing feeds and was not a good candidate for psychological intervention. In case patient has been tried on maximum dosage of anti-depressant and also augmented with other modalities such as antipsychotics or lithium, it is preferable to give a trial of ECT which can be further augmented with Venlafaxine if there is inadequate response. A study by Gonzalez-Pinto et al¹, showed 10 of 13 (76.9%) patients, were considered responsive to combined ECT-Venlafaxine treatment,

though the positive responses were not associated with venlafaxine. Another study by Neirenberg et al² showed that, Venlafaxine is effective for a significant, but small, minority of patients with rigorously defined triple-resistant depression. Venlafaxine dose and cardiac function has to be monitored in view of possible cases of arrhythmias/asystole as well as interaction with anesthetic agents. In conclusion, augmentation of ECT with Venlafaxine is an effective approach in Treatment Resistant Depression but will require close monitoring of cardiac function and medication dosage, especially in elderly population.

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