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ESCITALOPRAM IN TREATMENT OF SLEEP DISTURBANCES IN MAJOR DEPRESSIVE DISORDER

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Major depressive disorder (MDD) is common and severe affective disorder with sleep disturbances and non-bizarre delusions which are organized in permanent and unshakeable delusional system. Neurobiological basis of MDD is still completely unknown, but significant role has serotoninergic 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 sleep disturbances in MDD.

Methods: This prospective clinical study included 95 patients diagnosed by ICD-10 criteria for MDD, who are randomly divided into control (30 patients) and experimental group (65 patients). Patients were observed for 6 months in hospital and outpatients conditions, according to specially designed protocol, which included Hamilton Depression Rating Scale (HAMD) and Leeds Sleeping Evaluation Questionnaire (LSEQ). Control group was treated with maprotiline (75-150 mg/24h) and experimental group with escitalopram (10-20 mg/24h).

Results: Escitalopram therapy influenced on HAMD score with high statistical significance vs. maprotiline, p=0.000. Escitalopram therapy improves LSEQ score after 6 months in comparison to maprotiline therapy with high statistical significance p=0.000. Percentage of adverse effects is significantly lower in escitalopram (10.76%) than in maprotiline (26.67%) group.

Conclusion: Escitalopram has significantly better efficacy and lower adverse effects rate in treatment of depressive symptoms and sleep disturbances in MDD patients comparing to maprotiline.