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Management of Treatment-Resistant Schizophrenia With Clozapine Augmentation

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ABSTRACT: A 44-year-old woman with a history of chronic schizoaffective disorder, epilepsy, social phobia, anxiety, and panic attacks presented with concern for "feeling anxious." After a history, physical examination, and laboratory tests, the woman received a diagnosis of treatment-resistant schizophrenia. While clozapine is the standard therapy for schizophrenia, certain patients such as the woman in this case do not respond well to clozapine monotherapy, requiring clozapine to be augmented with other antipsychotics or antidepressants. This case outlines the unique challenges of managing patients with treatment-resistant schizophrenia, especially when they present with comorbid conditions such as epilepsy that can limit treatment options. A multi-pronged approach, including pharmacologic therapy as well as cognitive behavioral therapy, should also be considered.

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Gender Differences in Prodromal Symptoms of Dementia

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ABSTRACT: Study Objectives: This study proposed to test the postulate that the anxiety and insomnia symptom cluster (A/I) is a predictor of dementia.

METHODS: A retrospective data analysis was conducted on the Aging, Demographics, and Memory Study (ADAMS) dataset in order to determine whether A/I symptoms or treatment were associated with subsequent dementia or cognitive impairment (DCI). The study used logistic regression analysis and comparison of incidence rates on a sample of 249 participants.

RESULTS: There was a significant relationship between A/I symptoms and subsequent DCI in the male gender that was not found in the total sample or in females. No association with subsequent DCI was found for benzodiazepine usage or non-benzodiazepine A/I medication usage.

CONCLUSIONS: The gender differences identified suggest prodromal dementia phenotypes that are differentially expressed in males and females. By triangulating the approaches from multiple disciplines—such as neuroimaging and genetics—with prodromalsymptoms, it is possible that reliable early prediction may be accomplished.

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Dasotraline in Children With Attention Deficit Hyperactivity Disorder: Results of a Randomized, Double-Blind, Placebo-Controlled Study

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ABSTRACT: Objectives: Once-daily dosing with dasotraline, a novel dopamine and norepinephrine reuptake inhibitor, achieves stable plasma concentrations over 24 hours with once-daily dosing. This study evaluated dasotraline in children aged 6–12 years (NCT02428088).