

Escitalopram Eases Depression in Adolescents

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Escitalopram failed to significantly improve the symptoms of depression in children aged 6-11 years, but it did appear to improve symptoms in children aged 12-17 years, wrote Dr. Karen Dineen Wagner of the University of Texas, Galveston, and her colleagues.

The study included 264 children and adolescents aged 6-17 years who had been

diagnosed with major depressive disorder. The Children's Depression Rating Scale-Revised (CDRS-R) served as the primary outcome measure (J. Am. Acad. Child Adolesc. Psychiatry 2006;45:280-8).

The patients received either a placebo or 10 mg/day of escitalopram (Lexapro) for the first 4 weeks, with the option to increase dosage up to 20 mg/day for the next 4 weeks, depending on the patient's response to the medication and tolerance.

Overall, average changes in scores on the

CDRS-R from baseline were not significantly different among the 102 escitalopram patients and 115 placebo patients who completed the study (-21.9 vs. -20.2). However, a later analysis that adjusted for age group revealed significant improvements in CDRS-R scores from baseline among the 77 children aged 12-17 years who took escitalopram, compared with the 80 children aged 12-17 years who took a placebo, based on observed cases (-22.3 vs. -17.8).

In addition, adolescents in the escitalo-

pram group showed significant improvements in symptoms based on several secondary outcome measures, including the Clinical Global Impressions-Severity scale.

Headaches and abdominal pain were the only reported adverse events that occurred in more than 10% of patients in either group, and the discontinuation rate in both groups was 1.5%. The study was supported by Forest Laboratories, one of many companies from which Dr. Wagner has received research support. ■

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