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Treatment of resistant depression: Have we missed the right track?

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Introduction: In 1950's the clinical introduction of the first two specifically anti-depressant drugs: iproniazid, a monoamine-oxidase inhibitor and imipramine, the first tricyclic antidepressant started. Since that time up till now, many antidepressants working on different neurotransmitters and receptors linked to depression were discovered and introduced in clinical practice but the main advantage of them over the old ones is their higher tolerability by patients. Combining psychotherapy with pharmacological treatment can improve the success rate of treatment but a considerable portion of patients stay resistant to this combined treatment. Even with using electro-convulsive therapy (ECT) in treating resistant depression, up to 20% of patients don't respond to it. This means that there is still something missed in treating patients with resistant depression and something more is needed to treat resistant depression more effectively.

Objectives: This presentation will highlight the updates and the findings of the recent studies to find out the reason behind resistance to current available treatments for depression, and how to manage it appropriately.

Methods: In this study, critical review of various current literatures on this topic was done.

Results: Recent studies show that an isolated deficiency of thyroid hormones in the brain (mainly tri-iodothyronine i.e. T3) while their level in the blood and other tissues of the body are optimal is not a rare disorder which expresses itself as a psychological i.e., depressive disorder which is diagnosed wrongly and treated unsuccessfully as a major depressive disorder with the usual anti-depressants.

Conclusions: Although still preliminary, the recent studies can improve our understanding of the resistance in treating depression and the causes behind it. knowing of the exact mechanism of action of tri-iodothyronine (T3) which was tried as a monotherapy for depression before the era of antidepressants can explain the mechanism of resistance to the current treatments of depression and hence can help in resolving it, and it opens the door for reviewing the current guidelines and algorithms for management of depression to make it more efficient.

Biography

Aboelezz Mahmoud Kalboush is a Consultant Psychiatrist; he received his Master's degree in Psychiatry and Neurology from Ain-Shams University, Egypt in 2007. He is the Head of Psychiatry department in Alnoor Specialist Hospital, Saudi Arabia. He is responsible for training of medical students (both undergraduates and post-graduates) in Psychiatry.

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