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Running head: Ketamine for suicidal ideation. A randomized trial

Yoav Domany

Tel Aviv Sourasky Medical Center, Israel

Introduction: Depressed patients, presenting to emergency departments with acute suicidal ideation are a major public health concern. Ketamine, a rapidly acting antidepressant with anti-suicidal properties might offer relief. Methods: In a randomized, double-blind, placebo-controlled, proof-of-concept trial, eighteen depressed subjects with acute suicidal ideation, that required hospitalization, were randomized to either intravenous ketamine 0.2mg/kg or saline placebo. Safety and efficacy evaluations were scheduled for 15, 30, 60, 90, 120, 180 and 240 minutes, and on days 1, 2, 3, 7, and 14 post infusion. The main outcome measure was suicidal ideation, with secondary measures of depression.

Results: Nine subjects were randomized to each group. There were no differences between groups at baseline in any demographic or assessment scales. A reduction in suicidal ideation was noted at 90- 180 minutes (p<0.05). Ninety minutes post infusion 88% of the ketamine group had achieved remission of suicidal ideation compared to 33% in the placebo group (p<0.05). No serious adverse events were noted.

Conclusions: Ketamine was safe and effective for rapid reduction of suicidal ideation in depressed, highly suicidal, subjects presenting to the emergency department. Our results support further study of ketamine for acute suicidal ideation.