

A comparative study between pharmacotherapy and ECT in severely depressed elderly associated with general medical conditions

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This study was made as a therapeutic trial of depression in elderly patients who have associated controlled medical conditions.

Two groups of randomly assigned patients of severe depression associated with controlled medical illnesses were exposed to two regimens of therapy.

The drug group (30 patients) & the ECT group (30 patients). Both groups were insignificantly different as regards sociodemographic and baseline variables.

Pharmacotherapy group received fluoxetine 40 mg per day and sulpiride 600 mg per day in presence of psychotic symptoms. In ECT group, 18 patients (60%) treated by unilateral ECT and 12 patients (40%) received bilateral treatment after 5 sessions.

Hamilton Rating Scale for depression and Geriatric Depression Scale were used but the 50% reduction in the HRS-D score was the point of evaluation.

Brief pulse unilateral electroconvulsive therapy in average of nine sessions was associated with significant lower cognitive scores especially the Paired Associate Learning test that rapidly improved after two weeks of shock stoppage.

Pharmacotherapy group gave a lower percent results & a slower response rate.

There was higher effectiveness of ECT in managing severe depression over the combination antidepressant antipsychotic agent in the elderly sample.

The onset of ECT response started at two weeks or five sessions of unilateral ECT, and delayed up to four weeks in the combination pharmacotherapy group. ECT can cause memory changes during its course yet; memory can be regained to its pretreatment levels of function later on after end of ECT.