

Adjunctive Use of Atypical Antipsychotics for Major Depressive Disorder (MDD)

FDA-Approved Indications for Use of Atypical Antipsychotics in MDD

- Abilify – Treatment for MDD as adjunctive therapy with antidepressants
- Seroquel XR – Treatment for MDD as adjunctive therapy with antidepressants

Strategies to Address Non-response to Antidepressant Monotherapy

- Antidepressants for treatment of depression should be used at maximum tolerated dose for a minimum of 4–8 weeks to assess full response.
- Non-responders may be changed to an antidepressant from the same pharmacological class or from a different class. Response rates following medication change are similar, whether the change is made to another agent within the same class or in a different class. At least two separate antidepressants should be attempted.
- Non-adherence should be considered in members who fail to respond.
- Augmentation of antidepressant medications can utilize another non-MAOI antidepressant, or a non-antidepressant medication, such as lithium, thyroid hormone, or a second-generation antipsychotic.
- Consider treatment augmentation with evidence-based, nonpharmacologic strategies for non-responders.

When Atypical Antipsychotics are NOT Recommended for MDD

- Monotherapy (without antidepressant)
- Inadequate trial of antidepressant therapy (dose and/or duration of therapy) prior to addition of adjunctive agent

Dosing

- Abilify – Starting dose of 2–5 mg/day, with a maximum dose of 15 mg/day. Dose adjustments of up to 5 mg/day should occur gradually, at intervals of no less than 1 week.
- Seroquel XR – Starting dose of 50 mg/day for 2 days titrated to a dose of 150–300 mg/day.

Warnings

- Atypical antipsychotics utilization has been linked with hyperglycemia-related adverse events, and possibly diabetes mellitus. Risks and benefits of adding an atypical antipsychotic should be weighed for each recipient individually.
- All second-generation antipsychotics have a boxed warning regarding an increased incidence of mortality when these agents are used in elderly members with dementia-related psychosis.
- Abilify and Seroquel/Seroquel XR have the same boxed warning as the antidepressants in regards to an increased risk of suicidality in children, adolescents, and young adults. Close monitoring for signs and symptoms of suicidality in this population should occur.

References

- Abilify [package insert]. Princeton, NJ; Bristol Myers Squibb; February 2011.
- Seroquel [package insert]. Wilmington, DE; AstraZeneca; November 2011.
- Seroquel XR [package insert]. Wilmington, DE; AstraZeneca; December 2011.
- APA Practice Guideline for the Treatment of Patients with Major Depressive disorder. Available at: http://www.psychiatryonline.com/pracGuide/pracGuideTopic_7.aspx. Accessed: 1/26/2012.