

Clinical trial examines treatment of complicated grief

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A new study reports on the results of a randomized clinical trial that looked at whether the antidepressant citalopram would enhance complicated grief treatment psychotherapy, and if citalopram would be efficacious without it in an article published online by *JAMA Psychiatry*.

Complicated grief occurs in about 7 percent of bereaved individuals and it is characterized by persistent maladaptive thoughts, dysfunctional behaviors and poorly regulated emotions that interfere with the ability to adapt to loss. Co-occurring depressive symptoms are common but complicated grief is clearly differentiated from major depression.

M. Katherine Shear, M.D., of the Columbia University College of Physicians and Surgeons, New York, and coauthors included in their trial 395 bereaved adults who met the criteria for complicated grief from [academic medical centers](#) in Boston, New York, Pittsburgh and San Diego.

They were divided into groups prescribed citalopram (n=101), placebo (n=99), complicated grief treatment with citalopram (n=99) or complicated grief treatment with placebo (n=96). The majority of study participants were women (78%) and they were white (82%).

The authors report that psychotherapy with complicated grief treatment appears to be efficacious and that the addition of citalopram did not significantly improve outcome. However, co-occurring depressive symptoms decreased more when citalopram was added to complicated

grief treatment psychotherapy.

"In summary, CG [[complicated grief](#)] is a serious, prevalent, and frequently chronic and debilitating condition that needs to be recognized and treated. Complicated grief treatment [CGT] is the first-line treatment. Our results support the use of antidepressants in conjunction with CGT for relief of co-occurring [depressive symptoms](#). When CGT is unavailable, CGT-informed supportive clinical management with or without antidepressants may be a helpful approach," the study concludes.

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