

Mayo Clinic introduces precision medicine in psychiatry

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Mayo Clinic is highlighting the potential merits of using precision medicine in prescribing antidepressants. Details appear in the current issue of *Mayo Clinic Proceedings*. Eleven percent of Americans 12 years and older have been prescribed antidepressant medication, according to Centers for Disease Control and Prevention data from 2005-2008. These medications are regularly prescribed in psychiatric, pediatric, adolescent, family and general medicine clinics nationwide.

Mark A. Frye, M.D., department chair of Psychiatry and Psychology at Mayo Clinic, recognizes there is increasing interest in individualizing treatment selection for more than 20 treatments approved by the U.S. Food and Drug Administration (FDA) for [major depressive disorder](#). By doing so, physicians may be able to provide greater precision to pharmacotherapy recommendations for individual patients beyond the large-scale, clinical trials evidence base.

"The medical community continues to recognize that genetic variation may contribute to disparate patient reactions to drugs," Dr. Frye says. "For example, some may experience adverse side effects, while others respond positively to the same drug." He says the different responses to pharmacotherapy provide a unique opportunity to develop pharmacogenetic guidelines for psychiatry.

These comments are reflected in an evidence review of other studies published in the July issue of *Mayo Clinic Proceedings*. This review focuses on two major genetic tests that screen for pharmacokinetic

metabolizing genes CYP2D6 and CYP2C19—enzymes that metabolize selective serotonin reuptake inhibitors (SSRI).

Dr. Frye explains that using the electronic health record along with genetic testing results has the potential to further enable prescribers the ability to individualize treatment for their patients taking antidepressants.

Provided by Mayo Clinic

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