

Arthritis drug boosts effectiveness of antidepressant medication, study finds

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Giving severely depressed patients the arthritis drug celecoxib (Celebrex) dramatically boosted the effectiveness of their antidepressant medication, a Loyola study has found.

Loyola Medicine psychiatrist Angelos Halaris, MD, PhD presented the study at the Fifth International Congress on Psychiatry and the Neurosciences in Athens, Greece. Dr. Halaris is a professor in the Department of Psychiatry and Behavioral Neurosciences of Loyola University Chicago Stritch School of Medicine.

The eight-week study enrolled bipolar adults, aged 18 to 65, who were in the depressive phase of their disease and had not benefitted from an antidepressant. (Bipolar disorder is marked by alternating periods of elation and <u>depression</u>, with depression typically lasting longer.) Patients were randomly assigned to receive the antidepressant escitalopram (Lexapro) plus celecoxib or Lexapro plus a placebo.

Seventy-eight percent of the patients in the celecoxib group experienced at least a 50 percent reduction in their depression scores, with 63 percent reporting their depression had gone away completely. By comparison, only 45 percent of the placebo group recorded a 50 percent or more reduction in depression, with only 10 percent reporting their depression had lifted completely.

It typically takes four to six weeks before an antidepressant begins working. In the Loyola study, patients who took celecoxib began seeing a



benefit from their antidepressant within a week. Fifty-five <u>patients</u> completed the study: 31 in the Lexapro plus celecoxib group and 24 in the Lexapro plus <u>placebo group</u>.

Previous studies have found that depression revs up the immune system, resulting in chronic <u>inflammation</u>. This inflammatory response affects the normal balance of chemical messengers in the brain called neurotransmitters. Inflammation hinders the function of antidepressants that are designed to restore normal chemical balance. By fighting inflammation, celecoxib appears to make antidepressants more effective, Dr. Halaris said.

Celecoxib is used to treat pain, redness, swelling and inflammation from arthritis. It also can manage acute pain and menstrual cramps. By itself, it does not treat depression.

The study's findings support the hypothesis that inflammation plays a critical role in depression. Reducing inflammation with a drug such as celecoxib "reverses treatment resistance and enhances overall antidepressant response," Dr. Halaris wrote in the study. "Such an intervention, if implemented relatively early in the course of the disease, may arrest the neuroprogressive course of bipolar disorder."

Dr. Halaris' study, "Inflammation Control Reverses Treatment Resistance in Bipolar Depression," was presented during the International Congress on Psychiatry and the Neurosciences meeting Oct. 6 - 9.

Provided by Loyola University Health System

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