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EFFECT OF ADJUNCTIVE ARIPIPRAZOLE IN ACHIEVING VARIOUS LEVELS OF RESPONSE AND ON DOMAINS OF FUNCTIONING IN MDD: A POOLED ANALYSIS

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Introduction: Major Depressive Disorder (MDD) patients experience different levels of response and functionality impairments.

Objectives/aims: Evaluate levels of response for adjunctive aripiprazole therapy (AA) and effects of AA on patient functioning.

Methods: Data were pooled from three similar, randomized, double-blind, placebo-controlled trials with aripiprazole in MDD. Quartile response categories were defined by reduction (%) in MADRS >6 weeks of treatment: Minimal response ($\leq 25\%$), Partial response ($>25\%$ to $< 50\%$), Moderate response ($\geq 50\%$ to $< 75\%$), and Robust response ($\geq 75\%$). Proportions of placebo (AP) vs. AA patients achieving a response were compared (Cochran-Mantel-Haenszel test) for each category. Functionality was assessed using mean changes in Sheehan Disability Scale (SDS) scores. Changes in scores were compared (ANCOVA) between AA and AP.

Results: AA had more patients (%) compared with AP achieving partial (23.9% vs. 17.9%, $p=0.017$), moderate (23.1% vs. 15.0%, $p<0.001$), and robust responses (14.3% vs. 7.4%, $p<0.001$). AA had less (%) achieving minimal response compared with AP (38.7% vs. 59.6%, $p<0.001$). Mean changes are below.

	Adjunctive placebo, Mean change (N)	Adjunctive aripiprazole, Mean change (N)	P-value
Mean score	-0.7 (492)	-1.2 (507)	<0.001
Social domain	-0.7 (494)	-1.4 (508)	<0.001
Family domain	-0.7 (494)	-1.4 (508)	<0.001
Work/school domain	-0.6 (392)	-0.8 (384)	0.337

[Mean changes in SDS and domain scores]

Conclusions: Most inadequate responders who continued on AP were minimal responders (60%). 60% of aripiprazole patients rapidly achieved partial, moderate or robust response status. AA significantly improved social and family life domains of functioning.