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Stopping long term antidepressants

In this trial, patients had a history of at least two depressive episodes or took antidepressants for two years or longer and felt well enough to consider stopping them.¹ Patients were randomly assigned to maintain their current antidepressant therapy (maintenance group) or to taper and discontinue using a placebo (discontinuation group).

By 52 weeks, relapse occurred in 92 of 238 patients (39%) in the maintenance group and 56% in the discontinuation group. The NNT for this study was 6.

An unpublished NZ study in primary care found a similar result, 23.3% relapse in the discontinuation and 10.5% in the maintenance group (NNT = 7.8).²

If patients are interested in withdrawing from long-term antidepressants, many can likely do this successfully, but a proportion will feel the need to re-start their medication.

References:

- Maintenance or Discontinuation of Antidepressants in Primary Care. N Engl J Med (2021) <u>View here</u>
- Mangin D, et al. The effectiveness of maintenance SSRI treatment in primary care depression to prevent recurrence. Proceedings of the 2015 NAPCRG Group 43rd Annual Meeting.

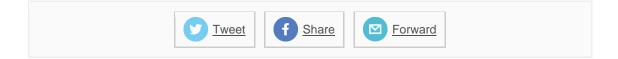
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