

SUCCESSFUL ECT TREATMENT AFTER RELAPSE DURING VNS THERAPY

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SUMMARY

We present a case of a patient with severe treatment resistant depression who relapsed while being treated with vagus nerve stimulation. We describe that he was safely treated with unilateral ECT concomitantly with the VNS.

Key words: treatment resistant depression - electroconvulsive therapy - vagus nerve stimulation

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Introduction

Electroconvulsive therapy (ECT) is considered a valid alternative treatment in treatment-resistant depression (TRD) (Marangell 2007). When confronted with ECT non-response, treatment options are limited (Bourgon et al. 2000). In these cases, vagus nerve stimulation (VNS) can be proposed (Keller 2005). However, when those remitted patients relapse, treatment guidelines are absent. We present a patient with a history of recurrent unipolar depressed episodes, who was considered extremely treatment-resistant, since he failed to respond to multiple trials of psychopharmacological agents including several bilateral ECT applications. Although the patient achieved complete remission with VNS, after two years he experienced a severe relapse.

Aim

To verify the safety and efficacy of the concomitant use of last resort ECT in a patient with VNS therapy.

Patient and method

Because of suicidal risk and to avoid cognitive side effects, we decided to acutely treat the patient with unilateral ECT.

Results

Patient received 11 sessions with a total duration of convulsion on EEG of 333 seconds. We observed a significant clinical improvement of depression symptoms, with 0 at the 21-item Beck Depression Inventory (BDI) and 5 on the Hamilton Rating Scale (HDRS). The patient remains in full remission after one year.

Conclusion

Besides that the concomitant use of ECT with VNS was found to be safe, this case supports the scarce literature on this issue that ECT can effectively be performed with good long-term clinical outcomes for severe relapses in TRD-patients under VNS. Further research should be conducted to substantiate our finding regarding the successful use of ECT in TRD-patients under VNS.

References

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