Conclusion: While treatment-resistant depression (TRD) is broadly associated with risk of suicide, current methods of categorizing patients as “treatment resistant” are imprecise. As noted by the investigators, “future work should examine the various factors that contribute to TRD and their associations with suicide independent of other measures of depression severity” (Pfeiffer, 363).

Title of Paper: “Treatment-Resistant Depression and Risk of Suicide”

Suicide and Life-Threatening Behavior (43)4 August 2013, 356-365.
Pfeiffer P, Kim H, Ganoczy D, Zivin K, Valenstein M

The Study: The authors review the literature on treatment-resistant depression (TRD) and its association with suicide as well as report the results of their analysis of an outpatient sample (n=2,493) of Veterans Administration patients treated for major depressive disorder (MDD). To determine the association between TRD and risk of suicide, the patients who committed suicide (n=499) within 2 years of the diagnosis of MDD were compared to those who did not.

Results: The authors remind us that one third of patients with MDD have TRD, which is associated with poor outcomes. Among patients with mood disorders, 2-5% die by suicide, and recently hospitalized patients with MDD are almost 5 times more likely to commit suicide vs. non-hospitalized patients. Although it has not been clearly established that TRD is associated with increased risk of suicide, the present study showed that 11.6% of patients in the suicide subgroup were classified as TRD vs. only 6.4% of patients in the non-suicide group.

Discussion: While suicide was not statistically more likely in the TRD subgroup, it is important for clinicians to consider failure to respond to therapy as a potential indicator of increased suicide risk.

Questions for further consideration:
1. How best to assess for TRD?
2. In patients said to have TRD, how to distinguish between “resistance to all available therapies” and those not given “best choice therapy based on the principles of personalized medicine”?

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NOTE: Each issue of “Suicide (Prevention) Notes” is prepared by a member of the IOL’s Executive Committee.
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