

Table 8. Pharmacotherapy for Treatment of Depression in SCI

Author Year Country Research Design PEDro Score Total Sample Size	Methods	Outcome
<p>Fann et al. (2015) USA RCT PEDro =10 NInitial=133 NFinal=126</p>	<p>Population: Mean age=40yr; Gender: males=99, females=34; Level of injury: paraplegia=70, quadriplegia=62, unknown=1; Severity of injury: incomplete=62, complete=71; Mean time post injury=11yr; Depression status=Major Depressive Disorder. Intervention: Individuals were randomized to receive venlafaxine extended release (150mg/d, n=69) or placebo (control, n=64) for 12wk. Outcomes were assessed pre and post treatment. Outcome Measures: Hamilton Depression Rating Scale (HAM-D), Maier Subscale, Symptom Checklist 20 (SC-20).</p>	<ol style="list-style-type: none"> 1. There was no significant difference between groups in improvement on the HAM-D (p=0.42) or SC-20 (p=0.14). 2. On the Maier subscale, there was a significant improvement in the treatment group when compared to the control group (p=0.02).
<p>Richardset al. (2015) USA RCT PEDro=10 NInitial=133 NFinal=123</p>	<p>Population: Mean age=40.0±11.0 yr; Gender: males=99, females=34; Time since injury=10.9±10.6 yr; Level of injury: C=62, T=58, L=12; Severity of injury: AIS A=71, B=20, C=12, D=30. Intervention: Participants were randomized to either a venlafaxine XR group or a placebo group using a flexible titration schedule over the course of 12 wk. Outcome Measures: Numeric rating scale 0-10 (NRS) for pain intensity, pain interference items of the brief pain inventory (BPI).</p>	<ol style="list-style-type: none"> 1. No significant difference was seen in mood among those with neuropathic or mixed pain. 2. Significant improvement in mood was reported among those with nociceptive pain.

<p>Salinas et al. (2012) Colombia RCT PEDro=9 NInitial=46 NFinal=44</p>	<p>Population: Mean age=36yr; Gender: males=42, females=4; Level of injury: paraplegia=28, quadriplegia=18; Severity of injury: incomplete=13, complete=33; Mean time post injury <2wk; Depression status=symptoms. Intervention: Individuals without neuropathic pain were randomized to receive carbamazepine (600mg/d, n=24) or placebo (control, n=22) for 1mo. Outcomes were assessed pre and post treatment, and at 3 and 6mo follow-up. Outcome Measures: Zung Self-Rating Depression Scale (ZSDS).</p>	<p>1. There was no significant between groups on the ZSDS at 1mo (p=0.829), 3mo (p=0.421), or 6mo (p=0.551).</p>
<p>Rintala et al. (2007) USA RCT Crossover PEDro=6 NInitial=38 NFinal=22</p>	<p>Population: Mean age=41yr; Gender: males=36, females=2; Level of injury: paraplegia=18, quadriplegia=20; Mean time post injury=11yr; Depression status=symptoms. Intervention: Individuals with chronic neuropathic pain received amitriptyline (50mg, 3x/d), gabapentin (1200mg, 3x/d), and diphenhydramine (25mg, 3x/d, control) for 8wk each in a randomized sequence. Outcomes were assessed every 2wk during each drug trial. Outcome Measures: Center for Epidemiologic Studies Depression Scale – Short Form (CES-D-SF).</p>	<p>1. There was no significant change in CESD-SF scores across time for any medication. 2. There was no significant difference in CES-D- SF scores between the three medications at any given time point.</p>

