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研究課題名(和文) 大うつ病性障害におけるエスシタロプラムとパロキセチン徐放製剤のランダム化比較試験

研究課題名(英文) efficacy and tolerability of escitalopram versus paroxetine-CR in Japanese patients with major depressive disorder: a randomized, masked-rater trial

研究代表者

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研究成果の概要(和文)：研究期間内に約100例の患者をエントリーすることができた。本研究は一部の患者は現在も研究が終了していないため、研究報告提出期限内にすべての患者を包括した解析を行うことができなかった。これまで研究が終了している患者のみでの解析では、効果や安全性に関して両群間で統計学的な有意差は認めなかった。今後全患者を対象とした解析で、結果が変わる可能性があることに注意していただきたい。

研究成果の概要(英文)：We included about one hundred patients with major depressive disorder. Some patients who enter the study have not complete the study. Regarding the interim analysis (not all patients include), there were not significant differences in the outcomes with respect to efficacy and safety between both treatment groups.

研究分野：精神科

キーワード：大うつ病性障害 エスシタロプラム パロキセチン徐放製剤

1. 研究開始当初の背景

大うつ病性障害は、再発を繰り返す疾患であり、十分な寛解、回復を得るためには長期にわたる治療が必要である。一方で、大うつ病性障害治療においては、抗うつ薬治療開始1ヶ月後で約50%が脱落するという調査結果もあり、抗うつ薬の治療継続性を高めることは大うつ病性障害治療の重要な課題である。昨年国内において上市されたエスシタロプラムは、Meta-Analyses of New Generation Antidepressants (MANGA) MANGA study (Cipriani et al., 2009) をはじめ種々のメタ解析の結果から、良好な治療継続性が期待できる薬剤である (Cipriani et al., 2009)。しかしながら、日本人大うつ病性障害と対象としたエスシタロプラムの臨床試験は報告されていない。更には、日本人大うつ病性障害を対象とした、抗うつ薬同士の直接比較試験も報告がない。また、2012年6月に上市されたパロキセチン徐放製剤は製剤的な工夫から、投与初期に問題となる消化器症状の軽減が期待でき、さらに、反復投与時の薬物血中濃度の変動が小さくなることで全般的忍容性の向上とともに治療継続に寄与できると報告されている。尚、パロキセチン徐放製剤と他の抗うつ薬を比較した RCT は、世界的にも、現在まで報告がなかった。

2. 研究の目的

これまでの大うつ病性障害における RCT の outcome は、効果、忍容性に焦点を当てた研究が大半を占める。しかしながら、実臨床において、「症状の重症度評価スケールでは点数は極めて改善しているのに、復職できない」といった患者が散見される。そのため、本研究の特徴でもあるが、PSP (Personal and Social Performance Scale) を用いて社会機能回復度の評価も行う。更に、重症度と社会機能回復度の得点が関連しない場合、今後の大うつ病性障害の臨床研究において、従来の重症度評価のみならず社会機能回復度評価の必要であるということ証明できるかもしれない。以上から、本研究は、世界初の日本人大うつ病性障害患者に対し、エスシタロプラムとパロキセチン徐放製剤のランダム化比較試験を行い、有効性および安全性について検討し、日本人大うつ病性障害患者における抗うつ薬のエビデンスを構築することを目的とした。

3. 研究の方法

対象患者: DSM-5-TR による主診断が大うつ病性障害と診断された外来通院及び入院中の患者 (SCID-1 を用いて診断) で HAM-D17 の合計点が 20 点以上の患者

調査方法: コンピューターにて治療薬を無作為割付け (中央登録方式)、評価者盲検化
本研究 (24 週) は、0 週、1 週、2 週、4 週、8 週、12 週、24 週および脱落時に評価を行う。

(1) 効果: ハミルトンのうつ病尺度得点の推移、治療反応率、寛解率

(2) 安全性 (Udvalg for kliniske undersøgelser 副作用スケール): 薬剤間での違いの解明

(3) 忍容性: それぞれの薬剤の治療中断率の比較

(4) 社会機能回復度 (Personal and Social Performance Scale)

4. 研究成果

研究期間内に約 100 例の患者をエントリーすることができた。本研究は 1 部の患者は現在も研究が終了していないため、研究報告提出期限内にすべての患者を包括した解析を行うことができなかった。これまで研究が終了している患者のみでの解析では、効果や安全性に関して両群間で統計学的な有意差は認めなかった。今後全患者を対象とした解析で、結果が変わる可能性があることに注意していただきたい。

5. 主な発表論文等

(研究代表者、研究分担者及び連携研究者には下線)

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