Review: combining pindolol with an SSRI improves early outcomes in people with depression


Q What is the efficacy and tolerability of pindolol plus selective serotonin reuptake inhibitors (SSRIs) in people with depression?

METHODS

**Outcomes**: Depressive symptoms: efficacy assessed by the proportion of total participants experiencing side effects. Depression Rating Scale (MADRS)). Tolerability: proportion of total participants experiencing side effects.

**Study selection and analysis**: Eligible studies were randomised controlled trials (RCTs) comparing pindolol plus SSRIs with placebo plus SSRIs in people with depression. RCTs examining early response (between 10 days and 2 weeks) and late response (3–6 weeks) were included. Studies involving non-SSRI antidepressants and crossover RCTs were excluded. Sensitivity and heterogeneity analyses were conducted.

**Main results**

Nine RCTs met inclusion criteria (594 participants).

**Early response**: five RCTs met inclusion criteria. Pindolol plus SSRIs significantly improved depressive symptoms compared with placebo plus SSRIs, for the first two weeks of treatment (OR 2.8, 95% CI 1.4 to 5.7; NNT = 6, 95% CI 4 to 20).

**Late response**: seven RCTs met inclusion criteria. There were no significant differences between groups after 3–6 weeks (OR 1.4, 95% CI 0.8 to 2.7). However, the late response studies were heterogeneous.

**Tolerability and safety**: there were no significant differences in tolerability or adverse events between groups (pindolol plus SSRIs vs placebo plus SSRIs; OR for tolerability, 1.3, 95% CI 0.8 to 2.3; OR for adverse events, 1.3, 95% CI 0.7 to 2.1).

**Conclusions**

During the first two weeks of treatment, the addition of pindolol to an SSRI appears to increase response; however there was no evidence of improved efficacy beyond this period.