

## **Addition of Aripiprazole or Bupropion Improves Treatment-Resistant Depression in Older Adults: A Clinical Trial Study**



The mental health of older adults suffering from treatment-resistant depression showed notable improvement when either aripiprazole, an atypical antipsychotic, or bupropion, a dopamine and norepinephrine reuptake inhibitor, were added to their existing antidepressant regimen, according to a study involving 742 participants aged 60 years or older. At the conclusion of the 10-week study, a greater number of participants who augmented their antidepressant treatment with aripiprazole or bupropion experienced remission of their depression compared to those who switched to a different single antidepressant medication.

Notably, participants who added aripiprazole to their antidepressant medication reported a lower rate of falls than those who combined their antidepressant with bupropion, as outlined in the research published in the *New England Journal of Medicine*.

An associated editorial concluded that these findings bolster the use of aripiprazole augmentation as a strategic approach to treatment-resistant depression in older individuals. This preference is primarily due to the lower risk of falls compared to bupropion augmentation.

In assessing this study, it offers promising therapeutic options for older adults grappling with treatment-resistant depression. The exploration of combination treatments, specifically the use of aripiprazole or bupropion alongside existing antidepressant medication, could enhance patient outcomes and quality of life. However, the differential impact on fall rates necessitates careful consideration in individual treatment plans. More research is needed to further understand the potential long-term effects and to investigate whether these findings extend to other populations with treatment-resistant depression.

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