

It is important to note that site differences were found during the course of this study. In fact, most remitters (83%) and patients who were found to be less treatment-resistant (66.4%) originated at two of the four study sites. While site and resistance status did not appear to influence primary study results, interpretation of these variables did impact regression estimates.

There was no significant difference in spontaneous adverse events according to treatment arm. Five patients who were receiving TMS withdrew from study participation due to adverse events (one because of syncope after 14 treatments and four because of pain or headaches after initial treatment). No seizures or suicides were documented. The most common adverse events that were reported were headache, discomfort at stimulation site, and insomnia for both groups.

Overall, TMS was associated with more favorable outcomes compared with sham control. Daily left prefrontal TMS therapy was shown to have significantly greater antidepressant effects and was well tolerated in patients with unipolar depression. Safety profiles were similar between the two groups.

Citation:

George MS et al. *Arch Gen Psychiatry* 2010;67(5):507-516.

New Research Poster: Use of Tai Chi Can Improve Resilience, Quality of Life, Cognition in Depressed Older Adults

Use of Tai Chi, a mind-body exercise, in combination with antidepressants provides additional improvements in older adults with depression, according to new research being presented at the American Psychiatric Association's Annual Meeting.

Older adults with depression are at increased risk for decline in health functioning, morbidity and mortality, including suicide. Fewer than half of elderly depressed patients achieve remission and functional recovery in response to initial use of antidepressants alone.

Researchers Helen Lavretsky, MD, MS, and Michael Irwin, MD, University of California, Los Angeles, CA, studied a group of older adults with major depression and compared the use of an antidepressant combined with use of Tai-Chi-Chi (TCC, a brief standardized version of Tai Chi) to the use of an antidepressant combined

with a health education program. The older adults each participated in two hours per week of either Tai Chi or the health education program.

The Tai Chi (Figure 1) and health education participants demonstrated comparable improvement in the severity of depression. However, people in the Tai Chi group demonstrated significantly greater improvement in resilience, health-related quality of life, and cognitive function (memory, attention, and executive function).

Figure 1. Tai Chi Participants.



Tai-Chi intervention has an advantage in that it is easily translatable to the community and can be readily implemented among adults with physical limitations. Researchers concluded that “complementary mind-body interventions can improve partial response to antidepressants via stress-reduction, improved physical functioning, increased socialization, and reduced risks of polypharmacy.”