Similar Effectiveness of Paroxetine, Fluoxetine, and Sertraline in Primary Care


The objective of this open-label, randomized intention-to-treat trial was to compare the effectiveness of three selective serotonin reuptake inhibitors (SSRIs) in depressed primary care patients. SSRIs are the most commonly prescribed class of antidepressant, yet it was not known prior to this study whether one was more effective than another.

A total of 573 depressed adult patients, recruited from 37 primary care physician offices across the United States, were enrolled in the study and completed a baseline interview. The patients were randomly assigned to receive paroxetine (n = 189), fluoxetine (n = 193), or sertraline (n = 191) for 9 months. Primary care physicians were allowed to switch patients to a different SSRI or non-SSRI antidepressant if they did not adequately respond to or tolerate the initial SSRI.

The primary outcome measure was change in the Medical Outcomes Study 36-Item Short-Form Health Survey (SF-36) Mental Component Summary score, which measures depression and other aspects of mental health on a scale of 0-100. Scores were compared across treatment groups at 1, 3, 6, and 9 months after enrollment. Secondary outcomes included other depression and psychological measures, multiple measures of social and work functioning, and other domains of health-related quality of life, such as physical functioning, concentration and memory, vitality, bodily pain, sleep, and sexual functioning.

Follow-up interviews were successfully completed in 94% of patients at 1 month, 87% at 3 months, 84% at 6 months, and 79% at 9 months. Responses to the three SSRIs were comparable on all measures and at all time points. The mean change in the SF-36 Mental Component Summary score at 9 months was + 15.8 in the paroxetine group, + 15.1 in the fluoxetine group, and + 17.4 in the sertraline group. The drugs were also associated with similar incidences of adverse effects and discontinuation rates.

The SSRI antidepressants paroxetine, fluoxetine, and sertraline were similar in effectiveness for depressive symptoms as well as multiple domains of health-related quality of life over the entire 9 months of this trial.

Link: http://jama.ama-assn.org/content/286/23/2947.long