INR Depression & Bipolar Disorder Files
David Longo, Ph.D.

Diagnosing Major Depressive Disorder DSM-5 Criteria

- Mild, Moderate, or Severe
- With Psychotic Features

- With Catatonia
  - Catatonia impairs an individual's perception of their environment, resulting in minimal or absent responses to external stimuli.

    - Treatment:
      - Ativan (lorazepam)
      - Initial dose: 1 to 2mg, IV
      - Repeat IV Ativan every 20 minutes until catatonia goes into remission
      - Maintenance Dose: 0.5mg to 1mg, qd to max of: 2mg, BID

Association between Income and Depression

(Li & Xiantong, 2026)

- Patients with major depression disorder (MMD) from United Kingdom, US, and China cohorts
- Results
  - Psychological factors showed the strongest relationship with MMD symptoms
  - Lower income was significantly related to MMD symptoms, loneliness, & disability
  - Loneliness was the most consistent mediator across all individuals with MMD across the UK, US, and China cohorts
- Clinical Implications
  - Loneliness in lower socioeconomic status was greatly associated with MMD incidence and symptom severity

Li, R. & Xiantong, Y. (2026) The Associations Between Income and Depression: A Cross-National Analysis, *Depression and Anxiety*, 5511191, doi.org/10.1155/da/5511191

Exxua (gepirone)
FDA approved 9/22/23

- Antidepressant and anxiolytic properties
- Has some properties similar to Buspar (buspirone)
- Partial 5-HT1A receptor agonist
- A potent Alpha2 adrenergic receptor antagonist
- Active metabolites: 3'-OH-gepirone and 1-PP. Gepirone
- Dosage: 18.2mg, XL; 36.3mg, XL; 54.5mg, XL; 72.6mg, XL

Auvelity
bupropion + dextromethorphan

- Rapid Acting Antidepressant (2022)
    - Wellbutrin (bupropion) plus Dextromethorphan (cough suppressant)
    - Dose:
        - 46/105mg – dextro/bupro
        - One tab, qd --- Max: one tab, bid

- 5-HT & NE reuptake inhibitors
- Sigma-1 agonist
- Uncompetitive NMDA – antagonist
- Alpha-3 & Alpha-4 nACh – antagonist

- Therapeutic Effects
    - Activating, calming
    - Increase motivation, energy, & alertness
    - Reduces irritability & increases frustration tolerance

Effectiveness of ECT on individuals with major depression disorder (MMD)
(Chifai et al., 2026)

- Meta-analysis of 15 studies: N=1617 individuals with MMD
- Results
    - ECT significantly reduced depression and anxiety symptoms
    - No adverse effects on cognitive effects after two-weeks of end of ECT
    - Individuals who were greater than 60 years old demonstrated the greatest reduction in depression & anxiety

Chifai, T. et al. (2026). The Therapeutic Effect of Electroconvulsive Therapy on Depressive Patients of Different Ages: A Systematic Review and Meta-Analysis, *Depression and Anxiety*, 26, 4345722. doi.org/10.1155/da/4345722

Social Support & Bipolar Disorders
(Ayhan et al., 2026)

- 105 individuals with Bipolar Disorder
- Assessed the effects of social support
- Results
    - Social support & Bipolar Recovery was positively & significantly asc recovery
    - Family social support significantly increased treatment adherence and contributed to recovery
    - Social Support was strongly associated with
        - Hope
        - Help
        - Success

        - Trust
        - Coping levels
- Clinical Implications
        - Therapy should be focused on increasing social support networks, especially family social support
- Ayhan, C. et al. (2026). The Relation Between Perceived Social Support, Treatment Adherence and Recovery Among Individuals Diagnosed With Bipolar Disorder, *Bipolar Disorders* 28: e70170, doi.org/10.1111/bdi.70170.

Effectiveness of Lithium (Li) + atypical antipsychotics (AAP) vs Depakote (DEP) (valproate + AAP) in first manic episode of Bipolar I Disorder

(Wang, et al., 2026). – Taiwan

- 3,909 pts between 2011-2022 with first manic episode of BPI
    - 1397: Li +AAP vs. 2.512: BEP + AAP
    - Mean age = 42.2; 42.9% male
- Results:
    - DEP + AAP demonstrated a significantly lower risk of re-hospitalization as compared to Li + AAP
- Clinical Implications
    - Use Depakote + Atypical Antipsychotic for treating first onset of BP II

Wang, P., et al. (2026). Comparative Effectiveness of Lithium- Vs. Valproate-Based Combinations With Atypical Antipsychotics in Preventing Rehospitalization After a First Manic Episode of Bipolar I Disorder*, Bipolar Disorders* 28: e70184, doi.org/10.1111/bdi.70184.

Lithium Effects on Suicide-Related Behavior among individuals with Bipolar I Disorder

(Guan et al., 2026)

- N=585 individuals with Bipolar I Disorder
    - Age range: 12 to 45 years
- Results
    - Lithium was associated with significantly lower odds of suicide-behaviors compared to other mood stabilizers
    - Aggression was positive related to suicide-behaviors

Guan, X., et al. (2026). Association Between Lithium Use and Suicide-Related Behaviors in Bipolar Disorder: A Multicenter Study, *Bipolar Disorders 28*: e70180, doi.org/10.1111/bdi.70180.