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EFFECTS OF REPETITIVE TRANSCRANIAL MAGNETIC STIMULATION (RTMS) ON SPECIFIC SYMPTOM CLUSTERS IN DEPERSONALIZATION DISORDER (DPD)

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Introduction: DPD is a highly disabling condition for which no efficacious treatment exists. Imaging and neurophysiology findings suggest that the right temporo-parietal junction (RTPJ) plays a crucial role in the conscious experience of the normal embodied self, mediating spatial unity of mind and body, a process impaired in DPD.
Objectives: We tested the potential therapeutic value of RTPJ rTMS and found that after 3 weeks 6/12 DPD patients responded with 51% reduction on the Cambridge Depersonalization Scale (CDS). After 3 more weeks of RTPJ rTMS responders showed 68% improvement.
Aims: Here we present results of 3 and 6 weeks of RTPJ rTMS on each of four cardinal symptom domains of depersonalization, i.e. emotional numbing, anomalous subjective recall, alienation from surroundings, and anomalous body experiences.
Methods: In responders we performed a retrospective analysis and applied repeated measures ANOVA on the average scores of each of the four symptom domains derived by the CDS.
Results: Responders to 3 weeks of RTPJ rTMS showed a significant improvement (71% reduction; P=0.01) in anomalous body experiences. However, after receiving 3 more weeks of RTPJ rTMS they reported further reduction in anomalous body experiences (76% reduction; P=0.00) and a clinically significant improvement in alienation from surroundings (54% reduction; P=0.02), emotional numbing (52% reduction; P=0.05), and anomalous subjective recall (57% reduction; P=0.11).
Conclusion: This is the first study suggesting that RTPJ rTMS may show therapeutic promise in DPD, and that anomalous body experiences scores might represent an early predictor of response for the remaining symptoms.

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