P-1190 - NEUROCOGNITIVE REMEDIATION FOR DEPRESSION: A FEASIBILITY STUDY

M.Semkovska, D.O'Lonargain, S.Lambe, D.M.McLoughlin
[1]Psychiatry, Trinity College Dublin, [2]St Patrick's University Hospital, Dublin, Ireland

Introduction: Depression-associated cognitive impairments often persist following mood improvement, worsen with repeated episodes and may precipitate depression relapse. Addressing cognitive deficits conjointly with mood symptoms could help recovery and optimise functioning. Neurocognitive remediation therapy (NCRT) has been shown to improve attention and memory in patients presenting various disorders affecting cognition but its efficacy has not yet been tested in depression.
Aims and methods: We aimed to assess the feasibility, in St.Patrick's University Hospital (Ireland), of a randomised controlled trial (RCT) that would test the NCRT efficacy to improve cognition in depression. Following recommendations for good practice in piloting of RCT designs, the feasibility study tested the research protocol, determined recruitment and compliance rates, and provided preliminary efficacy data. Patients admitted for depression were randomised to either receiving computer-assisted NCRT (n=7) or completing computer games (control condition, n=7) twice-weekly for ten consecutive weeks.
Results: Seventy-eight percent of eligible patients agreed to participate. Recruitment rates were of two participants per week. No patient refused randomisation. Compliance rates were 79% for the first five weeks, 64% completed eight weeks, but only 14% completed the ten weeks.
Non-parametric between-groups comparisons showed that the NCRT group improved significantly in three out of five targeted cognitive domains relatively to the control group. This was independent from pre-intervention levels of cognitive functioning.
Conclusions: Performing a RCT for NCRT in depression is feasible. However, our intervention protocol needs to be refined to optimise compliance rates. Weekly frequency might be increased to ensure NCRT completion within five weeks.

https://doi.org/10.1016/S0924-9338(12)75357-9 Published online by Cambridge University Press