P01-145 - **LAMOTRIGINE ADMINISTRATION IN PANIC DISORDER WITH AGORAPHOBIA**

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Objectives: The potential efficacy of various antiepileptic drugs in the treatment of Panic Disorder (PD) with (PDA) or without Agoraphobia has been studied in clinical trials, though not as yet that of lamotrigine (LTG).

Methods: We administered LTG to four outpatients with PDA according to DSM-IV-TR criteria, as an augmentation therapy (three patients with chronic and severe agoraphobia) or monotherapy (one drug-naïve patient with first-onset PD and moderate agoraphobia). LTG was titrated up to 200 mg/day within a 6-week period and remained at that dosage for another eight weeks. The patients were clinically monitored every week, while standard psychometric evaluations were completed at baseline and after the end of the trial.

Results: The patient under LTG monotherapy exhibited a complete remission of his panic attacks and a significant improvement in agoraphobic avoidances and other outcome measures. Some improvement was evident after the clinical trial in one more patient who exhibited a complete remission of her spontaneous panic attacks and in another patient who exhibited reductions in both her anxiety levels and PD-related cognitions.

Conclusions: Although anecdotal and thus in need of replication in well-designed large studies, our preliminary findings suggest that LTG as monotherapy (at 200 mg/day) might improve significantly PDA symptomatology in a proportion of drug-naïve patients with recent-onset PD and moderate agoraphobia, while LTG as augmentation agent (at 200 mg/day) might improve at least some aspects of the clinical psychopathology of PD patients with chronic and severe agoraphobia.

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