

Title (en)

TREATMENT OF DEPRESSION SECONDARY TO PAIN (DSP)

Title (de)

BEHANDLUNG VON DEPRESSION ALS SEKUNDÄRE FOLGEN VON SCHMERZEN (DSP)

Title (fr)

TRAITEMENT DE LA DEPRESSION CONSECUTIVE A LA DOULEUR

Publication

**EP 1545489 A4 20060823 (EN)**

Application

**EP 03748971 A 20030724**

Priority

- US 0323088 W 20030724
- US 39867602 P 20020724
- US 44303503 P 20030128

Abstract (en)

[origin: WO2004009069A1] Methods for the prevention or treatment of atypical depression secondary to pain (DSP) have been developed. The method generally involves administering an effective amount of a monoamine re uptake inhibitor to treat or prevent symptoms of DSP. In a preferred embodiment, a therapeutically effective amount of a dual serotonin norepinephrine reuptake inhibitor (SRNI) compound of a specific type, or a pharmaceutically acceptable salt thereof is administered. The most preferred SNRI compounds are non-tricyclic SNRIs, wherein serotonin reuptake inhibition is greater than norepinephrine reuptake inhibition; and NSRIs, wherein norepinephrine reuptake inhibition is greater than serotonin reuptake inhibition. The most preferred compound is milnacipran or a bioequivalent or pharmaceutically acceptable salt thereof. Other preferred compounds are duloxetine and venlafaxine or a bioequivalent or pharmaceutically acceptable salt thereof. In yet another embodiment, a therapeutically effective amount of a non-tricyclic triple reuptake inhibitor ("TRI") compound of a specific type, or a pharmaceutically acceptable salt thereof, is administered. The TRI compounds are characterized by their ability to block the reuptake (and, hence, increase central concentrations of) the three primary brain monoamines: serotonin, noradrenaline, and dopamine.

IPC 1-7

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Citation (search report)

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- See references of WO 2004009069A1

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DOCDB simple family (publication)

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