Letter to the Editor

Is Tiagabine Helpful in Generalized Anxiety Disorder?

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TO THE EDITOR:

The article by Schwartz et al. (1) demonstrates the possible pitfalls of short-term treatment studies. The mean HAMA scores decreased from baseline to week 8 and then increased between weeks 8 and 14. The mean HADS-Anxiety Subscale scores decreased from baseline to week 4 and then started to rise slowly until week 14. The doses of antidepressants were titrated down from baseline until week 4 while tiagabine was titrated up. Thus the patients were still on an antidepressant from baseline until week 4. The decrease of HAMA between weeks 4 and 8 could be a carry-over effect of antidepressants. The increases in HAMA and HADS ratings from week 8 (HAMA) and from week 4 (HADS) may be suggestive of a lack of efficacy of tiagabine in generalized anxiety disorder in this study. While the increases in ratings were not statistically significant, the time period may have been too short to demonstrate significant increase (note that only one decrease in HAMA scores was significant). One wishes that the authors could provide us with the data beyond week 14, to see whether the increase in HAMA and HADS, and thus the worsening in anxiety symptomatology, continued. This would clarify the possibility of lack of efficacy of tiagabine in generalized anxiety disorder. The increases of anxiety rating, though not significant, together with the fact that this was an open study and that the population sample was small (only 17 patients completed this study) makes any conclusion about the efficacy of tiagabine impossible. The alleviation of sexual side effects (fairly small, though statistically significant)—the main message of this article—may thus be moot point.

REFERENCE
