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“Switching to Intranasal Esketamine Maintains the Antidepressant Response to Intravenous Racemic Ketamine Administration: A Case Series of 10 Patients”

Purpose

This retrospective case series aims to assess the efficacy and safety of intranasal esketamine as maintenance antidepressant therapy in patients who have demonstrated clinical improvement with off-label intravenous racemic ketamine for treatment-resistant depression.

Methods

Included in this study are ten consecutive outpatients with treatment-resistant depression who all had a clinically meaningful response when treated with intravenous racemic ketamine and were then switched to intranasal esketamine for maintenance therapy. Patient outcomes were assessed with the Montgomery-Asberg Depression Rating Scale, Patient-Health Questionnaire-9, and Clinical Global Impression of Improvement scale at each visit. Adverse effects were assessed at each treatment.

Findings

Results indicated that nine patients either maintained the benefit or showed greater improvement when transitioned to intranasal esketamine for antidepressant maintenance therapy. One patient had worsening of depression due to an acute psychosocial stressor but still improved from baseline intravenous racemic ketamine treatment. Six patients returned to work or pursued employment, and four patients with suicidal ideation remitted during intravenous racemic ketamine and had no recurrence of suicidality with IN esketamine. No serious adverse reactions or tolerability issues were observed.

Implications

This case series reports the outcomes of ten severely ill patients with treatment-resistant depression who had a clinically meaningful response to intravenous racemic ketamine and demonstrated a maintenance of effect or continued improvement when transitioned to intranasal esketamine. While this finding needs to be replicated in larger, controlled studies, this report provides promising results for patients who have safely and effectively switched to FDA-approved intranasal esketamine after receiving acute or maintenance depression treatment with off-label intravenous racemic ketamine.