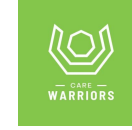


# Assoc Prof. Dr Amer Siddiq Amer Nordin

## University Malaya



- Dr Amer Siddiq Amer Nordin is an Associate Professor, consultant psychiatrist and smoking cessation specialist from University Malaya.
- He is also the President of Care Warriors Association, an NGO which aims to create more awareness in mental health matters and suicide prevention.
- As a result of his expertise, he is presently consultant for Emerging Journey Asia (EJA) Sdn Bhd, and advises several organisations including the Malaysia Ministry of Health, Institute for Youth Research (IYRES), the World Health Organisation Regional Office, UNICEF Malaysia, Befrienders KL, PLUS Malaysia on mental health matters.
- He actively shares his ideas and knowledge in all mass medias (television, radio, newspapers, magazines and social media) and has a bi-monthly slot on BFM Mind Matters series



**Assoc. Professor Amer Siddiq**

Consultant Psychiatrist & Smoking Cessation Specialist

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# ARE THERE NEW ADVANCES IN PSYCHOPHARMACOLOGY IN PSYCHIATRY AND WHY DO WE NEED NEWER TREATMENTS

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# Outline

- Introduction
- Present Gaps
- Treatment Options for Three Most Common Major Mental Illnesses
- Ways Forward
- Conclusion

## Newer Theories of Aetiology

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### Major Depression: One Brain, One Disease, One Set of Intertwined Processes

by  Elena V. Filatova \*  ,  Maria I. Shadrina  and  Petr A. Slominsky 

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\* Author to whom correspondence should be addressed.

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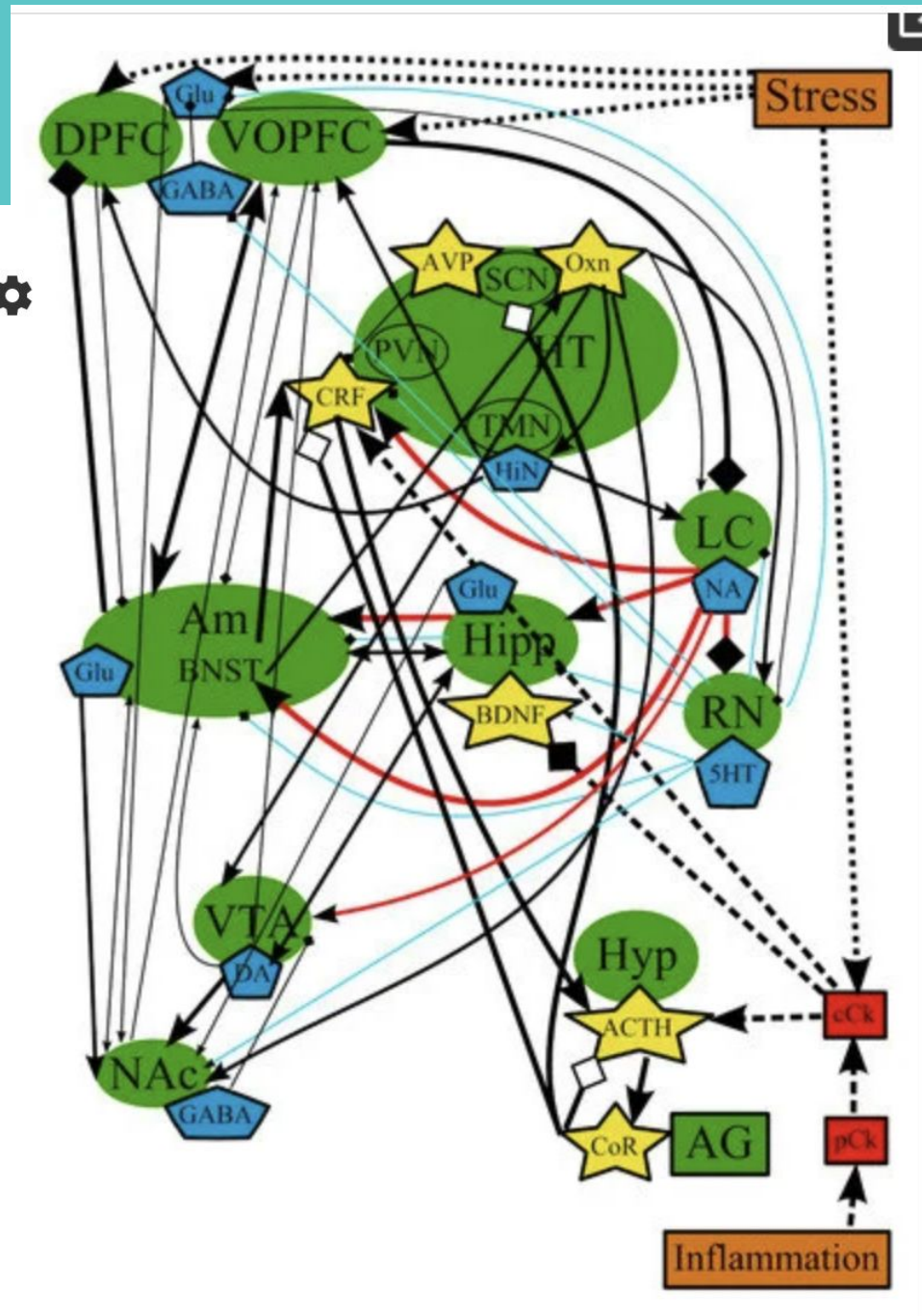
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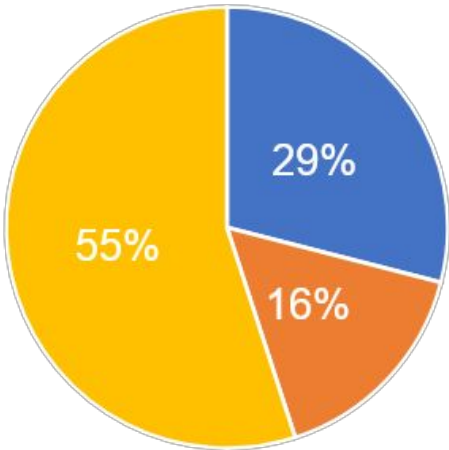
Filatova, E. V., Shadrina, M. I., & Slominsky, P. A. (2021). Major Depression: One Brain, One Disease, One Set of Intertwined Processes. *Cells*, *10*(6), 1283. MDPI AG. Retrieved from <http://dx.doi.org/10.3390/cells10061283>



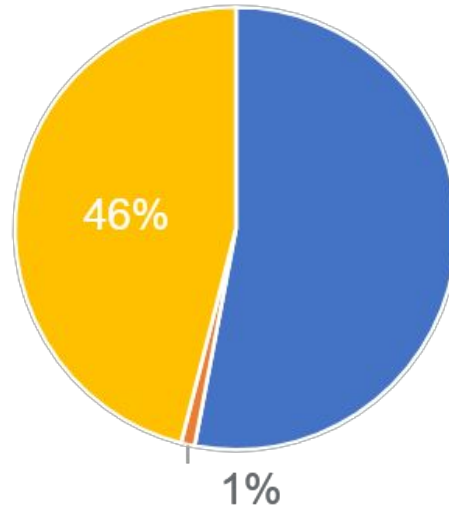
# Present Gaps

## Proportion of treatment goals reported by patients with MDD and HCPs during acute phase of depression\*<sup>1</sup>:

Patient-reported



HCP-reported



- To lift mood
- Functional goals (including to return to normal family, social and working life)
- To reduce side effects

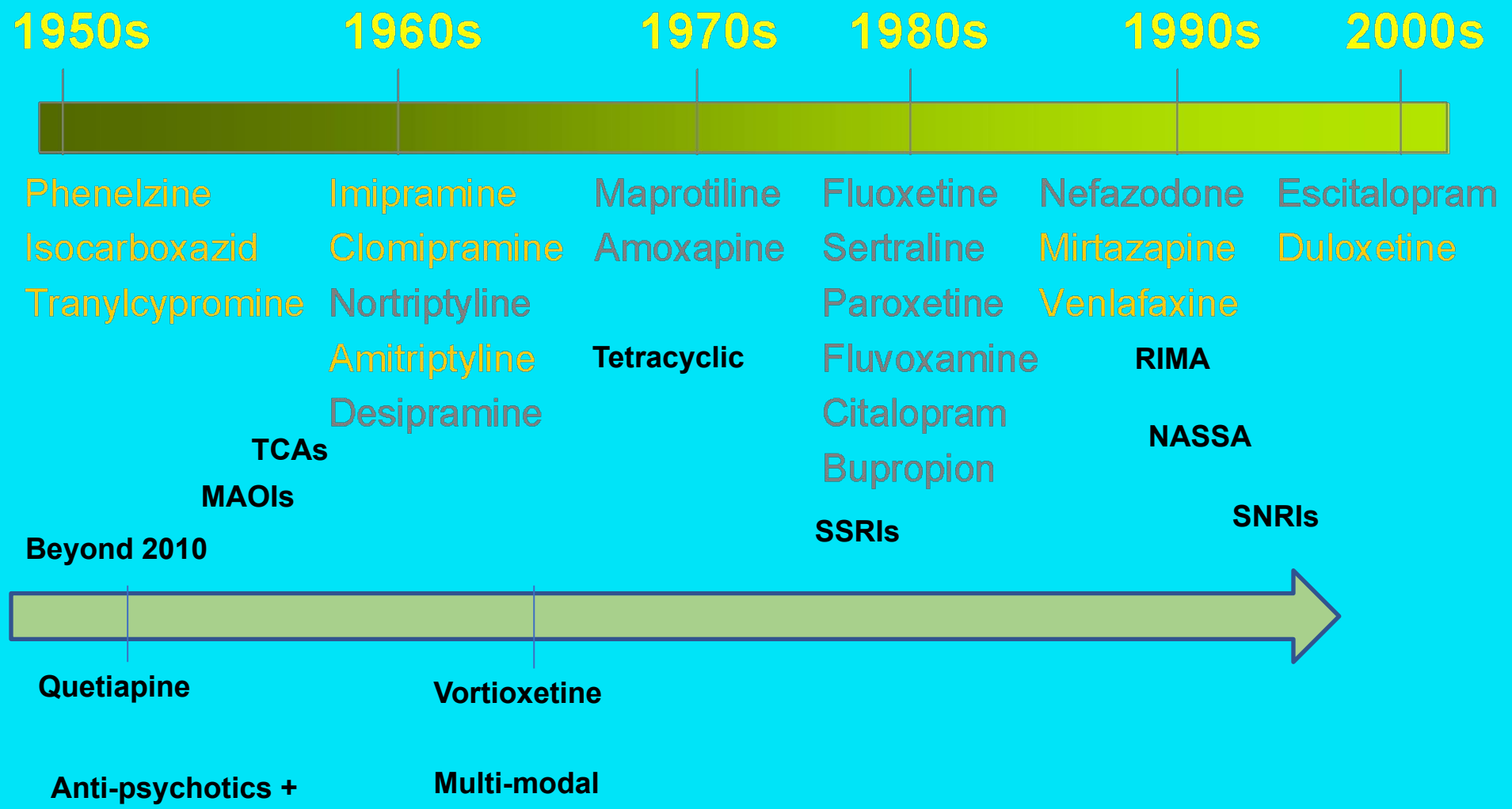
### In an online survey of patients with MDD (N=2008) and HCPs (N=1046)<sup>2</sup>:

- **Only cognitive** symptoms were reported by patients to be significantly associated with **functioning**
- **Both mood and cognitive** symptoms were considered by HCPs to be significantly associated with **functioning**

\*Patients and HCPs were asked to select one from a list of five that best reflects their hope for treatment. Q20 (patient-reported): "Which ONE of the following best reflects your hopes for treatment during this phase of depression?" Q24/55/86 (HCP): "Which ONE of the following best reflects your primary treatment goal during this phase of depression?" Base: Patients (n=425), HCP patient case records (n=1046). HCP, healthcare professional.

1. Adapted from Baune BT, Christensen MC. Front Psychiatry. 2019;10:335; 2. Christensen MC, et al. Front. Psychol. 2020;11:280.

# Evolution of Antidepressants



# Classes of Antidepressant

## CLASSICAL

**RIMA**

(Reversible Monoamine Oxidase Inhibitor)

**MAOI**

(Monoamine Oxidase Inhibitor)

**TCA**

(Tricyclic antidepressant)

## NEW GENERATION

**SSRI** (Selective serotonin reuptake inhibitor)

**Melatonergic**

**SNRI**

(Serotonin- norepinephrine reuptake inhibitors)

**NaSSA**

Noradrenaline and Specific serotonergic

**NARI**

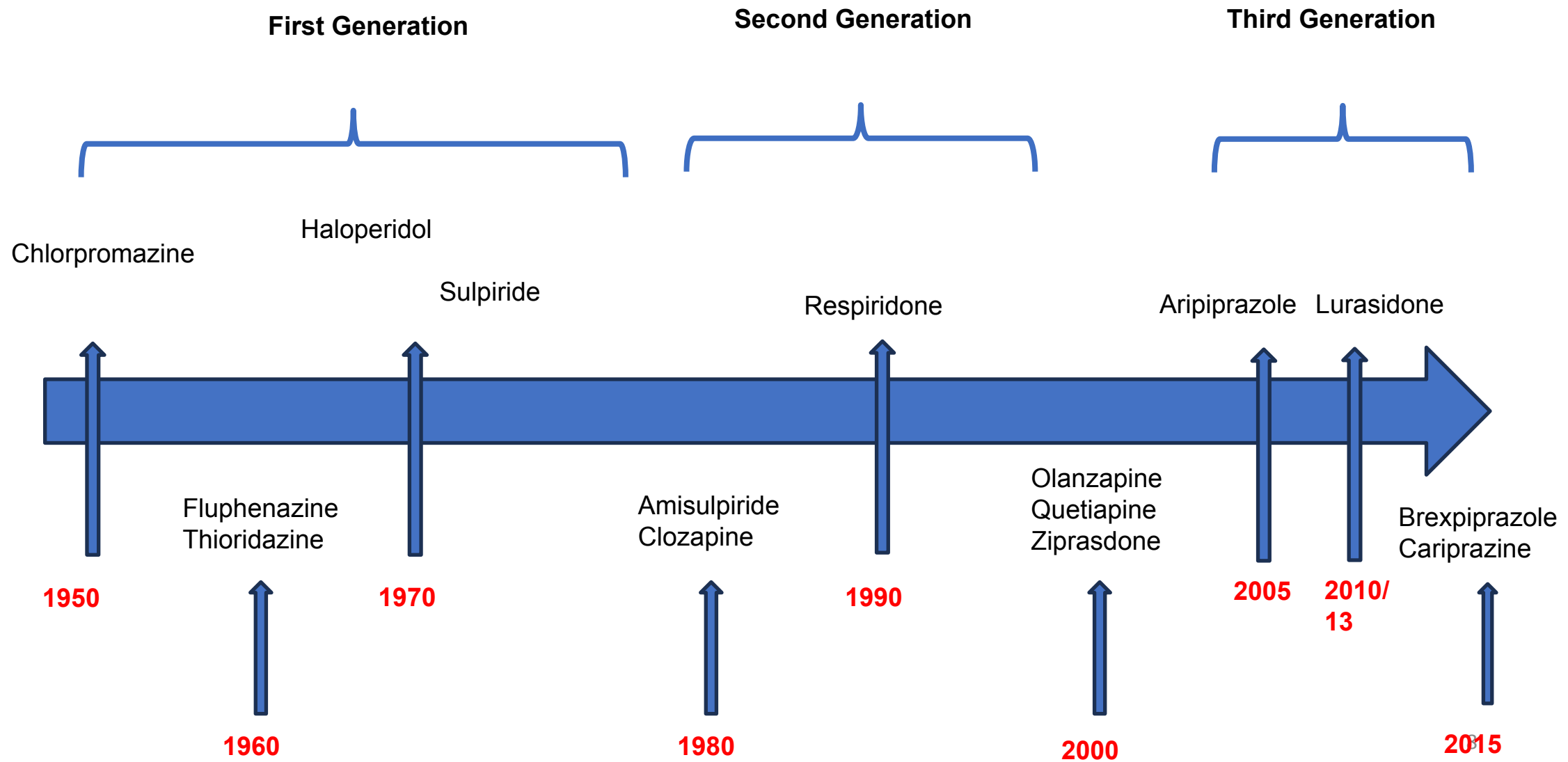
(Noradrenaline reuptake inhibitor)

**NDRI**

(Norepinephrine-Dopamine Reuptake Inhibitors)

**Multi Modal** (Selective serotonin reuptake inhibitor and Serotonin Modulator)

# Evolution of Antipsychotics

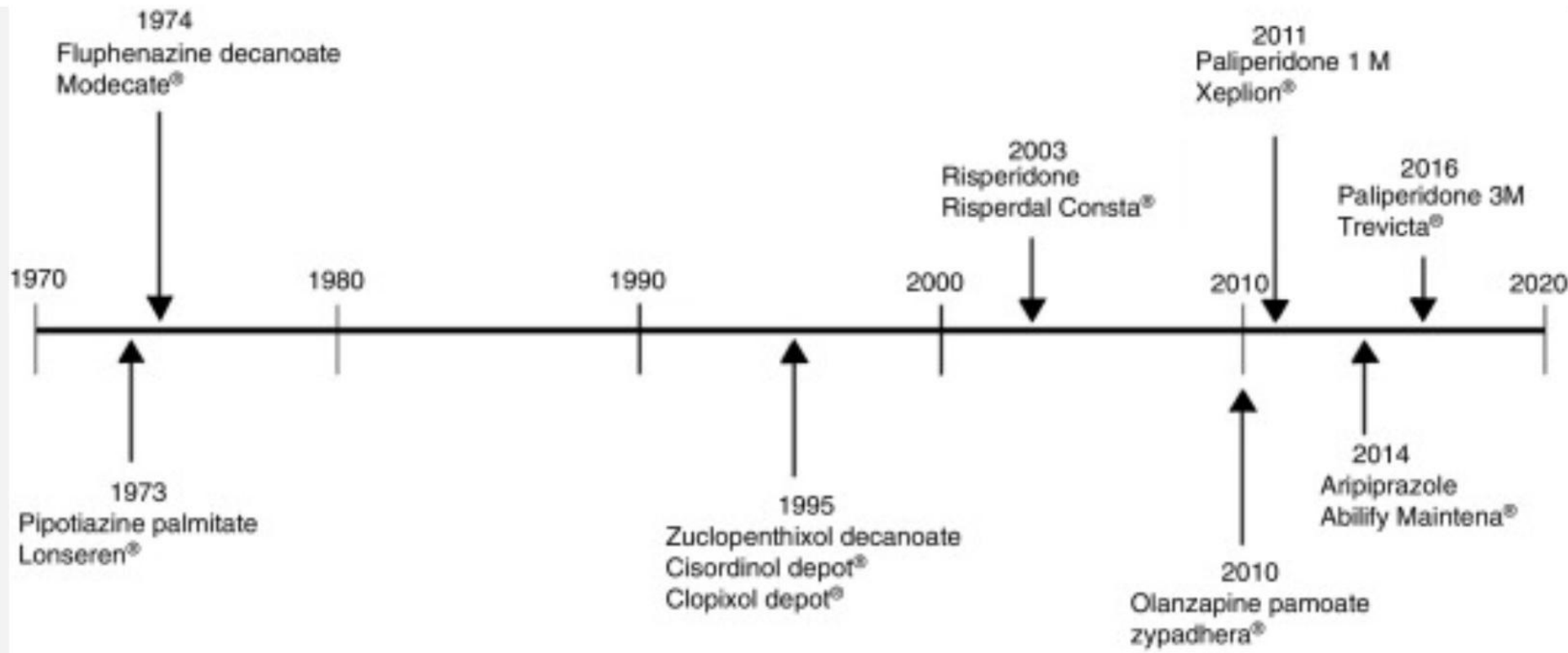




# Evolution of Long Acting Injectables



ScienceDirect.com

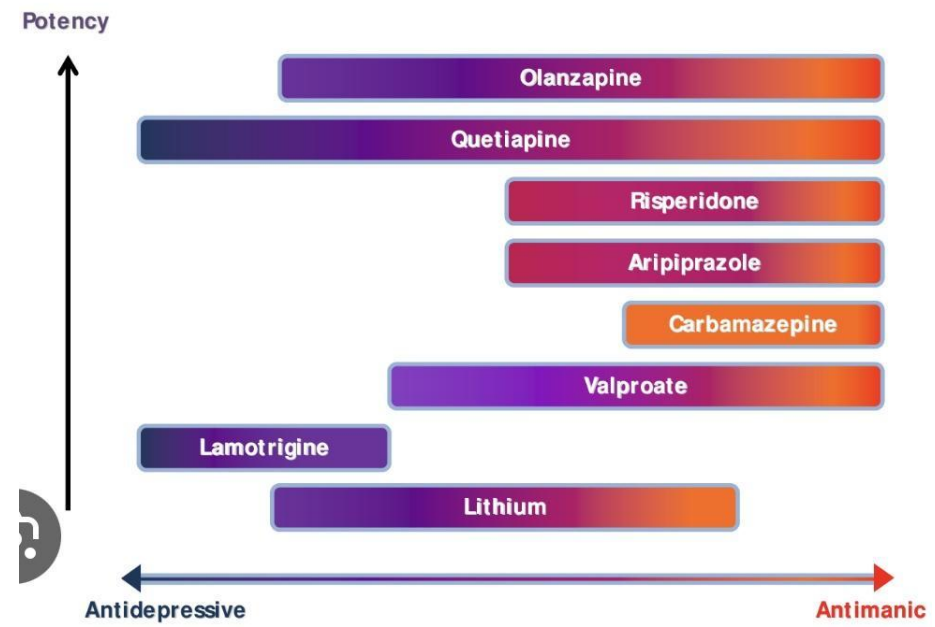


# Newer Agents for Bipolar Mood Disorder

	Acute Efficacy		Maintenance Efficacy	
	Manic Episode	Depressive Episode	Manic Recurrence	Depressive Recurrence
<i>Lithium</i>	○	△	○	△
<i>Valproate</i>	○	△	△	△
<i>Carbamazepine</i>	○	×	△	×
<i>Lamotrigine</i>	×	△ (○: when added to another MS in more severe depression)	×	○
<i>Olanzapine</i>	○	△ (○: when combined with an SSRI)	○	△
<i>Quetiapine</i>	○	○	○	○
<i>Aripiprazole</i>	○	×	○	×
<i>Risperidone</i> <i>Paliperidone</i>	○	×	△ (LAI)	×

○: sufficiently effective; reliable evidence available  
 △: possibly effective; modest evidence available  
 ×: no supportive evidence

MS: mood stabilizer  
 SSRI: selective serotonin reuptake inhibitor  
 LAI: long acting injection of risperidone



# Ways Forward

## RESEARCH

## Open Access



### Exploring life engagement from the perspective of patients with major depressive disorder: a study using patient interviews

François Therrien<sup>1\*</sup>, Stine R. Meehan<sup>2</sup>, Catherine Weiss<sup>3</sup>, Jennifer Dine<sup>4</sup>, T. Michelle Brown<sup>4</sup> and Erin M. MacKenzie<sup>5</sup>

#### Abstract

**Background:** Patient-reported outcomes can measure health aspects that are meaningful to patients, such as 'life engagement' in major depressive disorder (MDD). Expert psychiatrists recently identified ten items from the Inventory of Depressive Symptomatology Self-Report (IDS-SR) that can be used to measure patient life engagement. This study aimed to explore the concept of patient life engagement and provide support for the IDS-SR<sub>10</sub> Life Engagement subscale from the patient perspective.

**Methods:** Semi-structured video interviews were conducted with adults with MDD in the United States. Patients were asked if they ever felt engaged with life, and how this affected their feelings, activities, socializing, and thoughts. Then, patients discussed the ten expert-selected IDS-SR items, and rated the relevance of all 30 items to patient life engagement on a 4-point scale.

**Results:** Patients (N = 20) understood the 'engaged with life' concept and could provide examples from their own lives, such as increased energy/motivation (100%), being more social/spending time with others (85%), being more communicative (80%), and having better mood (75%). Nineteen patients (95%) indicated that all ten IDS-SR<sub>10</sub> Life Engagement items were relevant to patient life engagement, and nine of the ten items had a mean score  $\geq 3$  (moderately relevant). Four additional items (all relating to mood) also scored  $\geq 3$ .

**Conclusions:** Patients found the concept of life engagement to be important and relatable, and confirmed the IDS-SR<sub>10</sub> captures the defining non-mood-related aspects of patient life engagement. This research supports the relevance of patient life engagement as a potential clinical outcome beyond core mood symptoms, and the use of the IDS-SR<sub>10</sub> Life Engagement subscale in patient-oriented research.

**Keywords:** Major depressive disorder, Patient reported outcome measures, Self report, Interview, Patient participation, Patient life engagement

## Aiming for Life engagement: Health aspects that are meaningful to patients

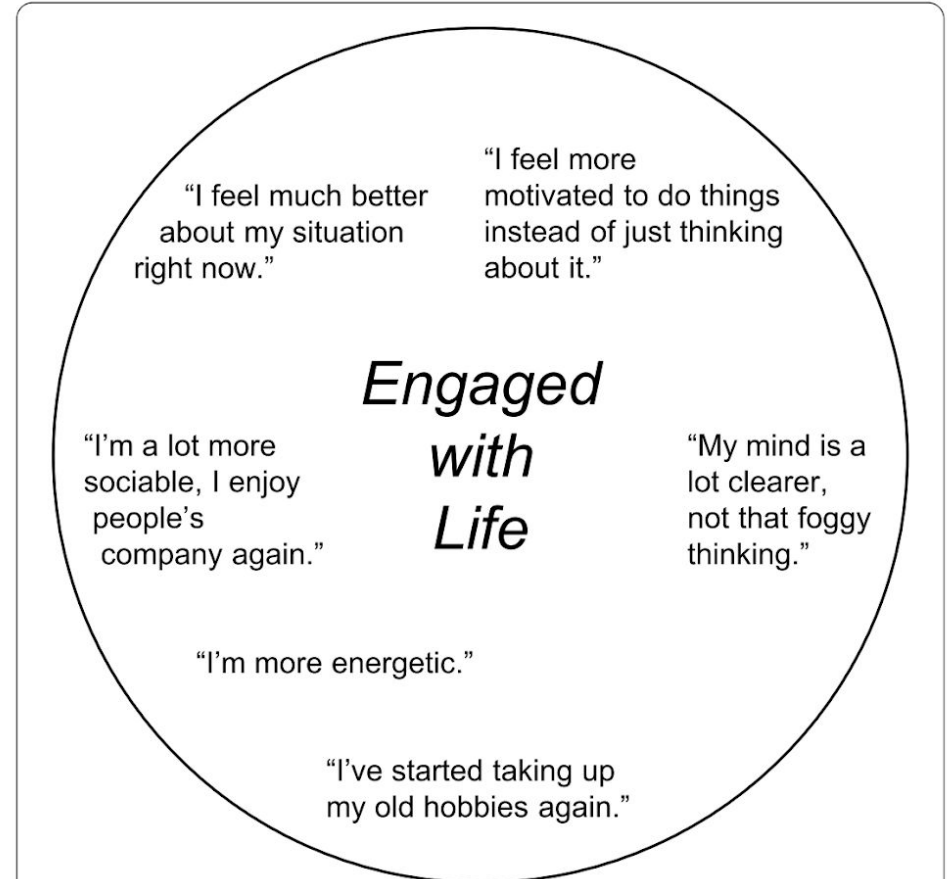


Fig. 1 “Engaged with life” handout

# Conclusion (1/2)

The science of mental illnesses are evolving and hence the need for newer agents to assist in ensuring patients are able to achieve recovery

Treatments need to be acceptable, accessible, affordable and most importantly effective to ensure adherence

The aim of treatment is not only sustained recovery but now, life engagement – that possibility that our patients are able to achieve whatever they wish to in their lifetime

# Conclusion (2/2)



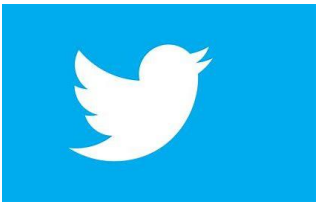
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Thank you