



The DA VINCI Pharmacotherapy Algorithm

Antidepressant Trials:																									
Trial A - Sertraline (Fluoxetine, Venlafaxine XR, Mirtazapine -if Sertraline previously tried and failed)																									
Trial B - Untried drug from Trial A Group																									
Trial C - Untried drug from Trials A and B Groups																									
Type	Medication	Dose	Week 1 of medication					Week 2 of medication					Week 3 of medication					Week 4	Week 5	Week 6	Week 7	Week 8 →	Max Dose		
			Day 1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20		21	22-28
Antidepressants	Sertraline	mg AM	25					50										Increase dose by 50 mg every 2-4 weeks depending on tolerability and response					200 mg/day		
	Fluoxetine	mg AM	10										20					Increase dose by 20 mg every 4 weeks depending on tolerability and response					80 mg/day		
	Venlafaxine XR	mg AM	37.5										75					Increase dose by 75 mg every 2-4 weeks depending on tolerability and response					375 mg/day		
	Mirtazapine	mg QHS	15										30					Increase dose by 15 mg every 2-4 weeks depending on tolerability and response					60 mg/day		

Tactics and Critical Decision Point and Critical Status Plan for the Treatment of Major Depressive Disorder					
STARTING POINT → Week 0 (CDP#1) QIDs ≥ 9 Symptomatic PLAN → Initiate antidepressant medication; adjust dose to lower end of therapeutic dose rang or serum level.					
QIDS-C16 SCORE	Week 2 of medication	Week 4 of medication	Week 6 of med.	Week 9 of med.	Week 12 of med.
QIDS ≤ 5 (Remission)	Continue current dose.				Go to follow-up phase.
QIDS = 6-8 (Partial Response)	Gradually increase dose as tolerated.	<ul style="list-style-type: none"> Continue current dose. Consider increasing dose. 	Increase/maximize dose.	<ul style="list-style-type: none"> Increase dose. Switch to another antidepressant. 	<ul style="list-style-type: none"> Switch to another antidepressant. Increase dose and reevaluate in 2 weeks.
QIDS = 6-8 (SEs intolerable)	<ul style="list-style-type: none"> Continue current dose and address SEs. Decrease dose and continue for 2 additional weeks. Switch to another antidepressant 	<ul style="list-style-type: none"> Continue current dose and address SEs. Switch to another antidepressant. 	<ul style="list-style-type: none"> Continue current dose and address SEs. Switch to another antidepressant. 		
QIDS ≥ 9 (Non-response)	Gradually increase dose as tolerated.	<ul style="list-style-type: none"> Increase dose. Switch to another antidepressant. 			
QIDS ≥ 9 (SEs intolerable)	<ul style="list-style-type: none"> Decrease dose and continue for 2 additional weeks. Switch to another antidepressant. 	<ul style="list-style-type: none"> Switch to another antidepressant. 	Switch to another antidepressant.	Switch to another antidepressant.	Switch to another antidepressant.

Type	Medication	Dose	Week 1 of medication					Week 2 of medication					Week 3 of medication					Week 4	Week 5	Week 6	Week 7	Week 8 →	Max Dose		
			Day 1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20		21	22-28
Anticraving	Trial 1: Naltrexone	mg/day	25					50															50 mg/day		
	Trial 2: Acamprosate	mg TID	333	333				666															666 mg TID		
	Trial 3: Topiramate	mg AM											25					50	50	100	100	150	300 mg/day		
	mg PM	25					50										100	100	150	150					
Criteria for Anti-Craving Medication Treatment Non-Responders												Criteria for Anti-Craving Medication Switch													
Treatment non-Responder will have more than 7 (women) or 14 (men) drinks per week on average. OR More than 1 day on which more than 3 drinks (women) or 4 drinks (men) were consumed over the period of 2 weeks.												Being defined as a Treatment non-Responder at 3 consecutive visits will trigger a switch of anticraving medication to the next level.													