Depression and dysphoria in adult and adolescent patients with Tourette's disorder treated with risperidone.

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Depression is a common comorbid condition in patients with Tourette's disorder. While risperidone is not usually known to induce dysphoria or depression in patients treated for other psychiatric disorders, previous short-term 4- to 12-week trials of risperidone for Tourette's disorder have reported a 2.6% to 30.8% incidence of depression.

A retrospective study was carried out in 58 adult and adolescent patients with Tourette's disorder (Tourette Syndrome Classification Study Group diagnosis) who received risperidone between Jan. 1, 1993, and Dec. 31, 2000, at the Allan Memorial Institute, McGill University Health Centre, Montreal, Quebec, Canada. Charts of all patients were examined for evidence of, and risk factors for, DSM-IV-defined major depressive disorder (MDD) or dysphoria.

Seventeen (29.3%) of 58 patients developed MDD, including 1 patient who later committed suicide and 13 patients (22.4%) who became dysphoric while taking risperidone. Nine of the 17 patients who developed MDD were relapses, i.e., patients with a history of depression prior to taking risperidone, while the remainder were new cases, i.e., patients with no previous history of depression. A positive personal history of MDD was the only factor to significantly (p