Resource Summary Report

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Sequenced Treatment Alternatives to Relieve Depression Study

RRID:SCR_008051
Type: Tool

Proper Citation

Sequenced Treatment Alternatives to Relieve Depression Study (RRID:SCR_008051)

Resource Information

URL: http://www.nimh.nih.gov/funding/clinical-trials-for-researchers/practical/stard/index.shtml

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Description: A nationwide public health clinical trial conducted to determine the effectiveness of different treatments for people with major depression, in both primary and specialty care settings, who have not responded to initial treatment with an antidepressant. This is the largest and longest study ever done to evaluate depression treatment. The study is completed and no longer recruiting participants. Each of the four levels of the study tested a different medication or medication combination. The primary goal of each level was to determine if the treatment used during that level could adequately treat participants?????? major depressive disorder (MDD). Those who did not become symptom-free could proceed to the next level of treatment. The design of the STAR*D study reflects what is done in clinical practice because it allowed study participants to choose certain treatment strategies most acceptable to them and limited the randomization of each participant only to his/her range of acceptable treatment strategies. No prior studies have evaluated the different treatment strategies in broadly defined participant groups treated in diverse care settings. Over a seven-year period, the study enrolled 4,041 outpatients, ages 18-75 years, from 41 clinical sites around the country, which included both specialty care settings and primary medical care settings. Participants represented a broad range of ethnic and socioeconomic groups. All participants were diagnosed with MDD, were already seeking care at one of these sites, and were referred to the trial by their doctors. * STAR*D Study Medications: Citalopram (Celexa), Sertraline (Zoloft), Bupropion SR (Wellbutrin SR), Venlafaxine XR (Effexor XR), Buspirone (BuSpar), Mirtazapine (Remeron), Triiodothyronine (T3) (Cytomel), Nortriptyline (Pamelor, Aventyl), Tranylcypromine (Parnate), Lithium (Eskalith, Lithobid)

*STAR*D Talk Therapy:Cognitive Therapy

Abbreviations: STAR*D

Synonyms: Sequenced Treatment Alternatives to Relieve Depression (STAR*D) Study, NIMH Sequenced Treatment Alternatives to Relieve Depression (STAR*D) Study, NIMH Sequenced Treatment Alternatives to Relieve Depression Study

Resource Type: data or information resource, topical portal, clinical trial, research forum portal, disease-related portal, portal

Defining Citation: PMID:17074942, PMID:15061154

Keywords: depressive disorder, clinical trial, major depressive disorder, adult

Funding: NIMH

Resource Name: Sequenced Treatment Alternatives to Relieve Depression Study

Resource ID: SCR_008051

Alternate IDs: nif-0000-10312

Old URLs: http://www.star-d.org/

Record Creation Time: 20220129T080245+0000

Record Last Update: 20250416T063511+0000

Ratings and Alerts

No rating or validation information has been found for Sequenced Treatment Alternatives to Relieve Depression Study.

No alerts have been found for Sequenced Treatment Alternatives to Relieve Depression Study.

Data and Source Information

Source: SciCrunch Registry

Usage and Citation Metrics

We found 8 mentions in open access literature.

Listed below are recent publications. The full list is available at dkNET.

Pigott HE, et al. (2023) What are the treatment remission, response and extent of improvement rates after up to four trials of antidepressant therapies in real-world depressed patients? A reanalysis of the STAR*D study's patient-level data with fidelity to the original research protocol. BMJ open, 13(7), e063095.

Buss JF, et al. (2023) Methods for quantifying the heterogeneity of psychopathology. BMC psychiatry, 23(1), 897.

Nunez JJ, et al. (2021) Replication of machine learning methods to predict treatment outcome with antidepressant medications in patients with major depressive disorder from STAR*D and CAN-BIND-1. PloS one, 16(6), e0253023.

Liu D, et al. (2021) ERICH3: vesicular association and antidepressant treatment response. Molecular psychiatry, 26(6), 2415.

Shumake J, et al. (2021) Inclusion of genetic variants in an ensemble of gradient boosting decision trees does not improve the prediction of citalopram treatment response. Scientific reports, 11(1), 3780.

Taliaz D, et al. (2021) Optimizing prediction of response to antidepressant medications using machine learning and integrated genetic, clinical, and demographic data. Translational psychiatry, 11(1), 381.

Fabbri C, et al. (2020) A polygenic predictor of treatment-resistant depression using whole exome sequencing and genome-wide genotyping. Translational psychiatry, 10(1), 50.

Williams LM, et al. (2011) International Study to Predict Optimized Treatment for Depression (iSPOT-D), a randomized clinical trial: rationale and protocol. Trials, 12, 4.