

Supplementary Online Content

Jarrett RB, Minhajuddin A, Gershenfeld H, Friedman ES, Thase ME. Preventing depressive relapse and recurrence in higher-risk cognitive therapy responders: a randomized trial of continuation phase cognitive therapy, fluoxetine, or matched pill placebo. *JAMA Psychiatry*. Published online September 4, 2013.
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eAppendix. Supplemental footnotes

eTable. Pretreatment demographic and clinical characteristics of cognitive therapy responders presenting with recurrent major depressive disorders

This supplementary material has been provided by the authors to give readers additional information about their work.

eAppendix. Supplemental Footnotes

Continuation Phase Therapies for Higher Risk Cognitive Therapy Responders Table 1 eSupplement

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2 **Supplemental Footnotes**

3 The following significant protocol violations occurred during the 11 years of data collection. As
4 recommended by the Data Safety and Monitoring Board (DSMB), data were analyzed according
5 to how the patients were treated during data collection.

6 ^a Two patients entered CT with $HRSD_{17} = 13$ at one of the two diagnostic visits; of these during
7 CT 1 responded and 1 dropped out. Four (1 early and 3 late) responders were misclassified as
8 late and early responders, respectively.

9 ^b Three acute phase CT nonresponders were randomized to the continuation phase in error and
10 are included in the intention to treat analysis, as recommended by Lachin⁴⁷ and Adams-Huet and
11 Ahn.⁴⁸

12 ^c One lower risk responder was misclassified as higher risk in error, and randomized to and
13 analyzed in C-CT.

eTable. Pretreatment Demographic and Clinical Characteristics of Cognitive Therapy Responders Presenting With Recurrent Major Depressive Disorders

Continuation Phase Therapies for Higher Risk Cognitive Therapy Responders
Table 1 eSupplement

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15 Supplemental Table 1: Pretreatment Demographic and Clinical Characteristics of Cognitive

16 Therapy Responders Presenting with Recurrent Major Depressive Disorders

Domain	n	Characteristics	Total (n=241)	PBO (n=69)	FLX (n=86)	C-CT (n=86)
Demographic		Sex, No (%) female	162 (67.2)	42 (60.9)	57 (66.3)	63 (73.3)
		Race, No (%) white	205 (85.1)	62 (89.9)	72 (83.7)	71 (82.6)
		Age, mean (SD)	42.7 (11.8)	43.6 (12.3)	41.6(11.8)	43.1 (11.5)
		Marital status, No (%)				
		<i>Single</i>	138 (57.3)	36 (52.2)	56 (65.1)	46 (53.5)
		<i>Partnered</i>	103 (42.7)	33 (47.8)	30 (34.9)	40 (46.5)
		Education, mean (SD)	15.7 (2.9)	15.3 (3.1)	16.0(3.0)	15.7 (2.7)
		Employment, No (%)				
		Full time	120 (49.8)	35 (50.7)	44 (51.2)	41 (47.7)
		Part time	28 (11.6)	9 (13.0)	12 (14.0)	7 (8.1)
		Homemaker/Caregiver	18 (7.5)	5 (7.3)	4 (4.7)	9 (10.5)
		Student	14 (5.8)	2 (2.9)	6 (7.0)	6 (7.0)
		Retired	9 (3.7)	2 (2.9)	5 (5.8)	2 (2.3)
		Other	13 (5.4)	4 (5.8)	3 (3.5)	6 (7.0)
		Unemployed	39 (16.2)	12 (17.4)	12 (14.0)	15 (17.4)
and		HRSD ₁₇ Depression Severity Scores, mean (SD)				

Continuation Phase Therapies for Higher Risk Cognitive Therapy Responders
Table 1 eSupplement

Domain	n	Characteristics	Total (n=241)	PBO (n=69)	FLX (n=86)	C-CT (n=86)
		At final pre-treatment follow-up	20.0 (3.9)	20.4 (3.9)	19.9(3.9)	19.9(4.0)
		At randomization	7.5 (3.4)	7.4 (3.0)	7.5(3.6)	7.5(3.4)
		Age at onset, in years, Median	18.0	19.0	17.0	19.5
		<i>Length of current episode in months, Median, ¶, †, §</i>	9.0	9.0	6.0	12.5
		Length of illness in years, Median	20.0	19.0	20.5	21.0
		No. of episodes, median	4.0	3.0	4.0	4.0
		Comorbid DSM-IV diagnoses, No (%)				
		Current	96 (39.8)	26 (37.7)	37 (43.0)	33 (38.4)
		Lifetime	181 (75.1)	51 (73.9)	67 (77.9)	63 (73.3)
		Depressive subtype – N (%)	11 (4.6)	2 (2.9)	5 (5.8)	4 (4.7)
		RDC endogenous, definite	84 (35.2)	26 (38.2)	34 (40.0)	24 (27.9)
		DSM-IV melancholia	85 (35.6)	22 (32.8)	37 (43.0)	26 (30.2)

17 ¶: $p \leq .05$ for comparing the patients in the three groups (PBO, FLX, and C-CT).

18 †: $p \leq .05$ for comparing the patients in the PBO and FLX groups.

19 ‡: $p \leq .05$ for comparing the patients in the PBO and C-CT groups.

20 §: $p \leq .05$ for comparing the patients in the FLX and C-CT groups.