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[Randomized Controlled Trial](#) [JAMA Psychiatry](#). 2016 Aug 1;73(8):789-95.doi: [10.1001/jamapsychiatry.2016.1031](https://doi.org/10.1001/jamapsychiatry.2016.1031).

Whole-Body Hyperthermia for the Treatment of Major Depressive Disorder: A Randomized Clinical Trial

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Erratum in

[Omitted Statistical Analysis Description and Errors in Figure.](#)

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JAMA Psychiatry. 2016 Aug 1;73(8):878. doi: [10.1001/jamapsychiatry.2016.1634](https://doi.org/10.1001/jamapsychiatry.2016.1634).

PMID: 27409072 No abstract available.

Abstract

Importance: Limitations of current antidepressants highlight the need to identify novel treatments for major depressive disorder. A prior open trial found that a single session of whole-body hyperthermia (WBH) reduced depressive symptoms; however, the lack of a placebo control raises the possibility that the observed antidepressant effects resulted not from hyperthermia per se, but from nonspecific aspects of the intervention.

Objective: To test whether WBH has specific antidepressant effects when compared with a sham condition and to evaluate the persistence of the antidepressant effects of a single treatment.

Design, setting, and participants: A 6-week, randomized, double-blind study conducted between February 2013 and May 2015 at a university-based medical center comparing WBH with a sham condition. All research staff conducting screening and outcome procedures were blinded to randomization status. Of 338 individuals screened, 34 were randomized, 30 received a study intervention, and 29 provided at least 1 postintervention assessment and were included in a modified intent-to-treat efficacy analysis. Participants were medically healthy, aged 18 to 65 years,

met criteria for major depressive disorder, were free of psychotropic medication use, and had a baseline 17-item Hamilton Depression Rating Scale score of 16 or greater.

Interventions: A single session of active WBH vs a sham condition matched for length of WBH that mimicked all aspects of WBH except intense heat.

Main outcomes and measures: Between-group differences in postintervention Hamilton Depression Rating Scale scores.

Results: The mean (SD) age was 36.7 (15.2) years in the WBH group and 41.47 (12.54) years in the sham group. Immediately following the intervention, 10 participants (71.4%) randomized to sham treatment believed they had received WBH compared with 15 (93.8%) randomized to WBH. When compared with the sham group, the active WBH group showed significantly reduced Hamilton Depression Rating Scale scores across the 6-week postintervention study period (WBH vs sham; week 1: -6.53, 95% CI, -9.90 to -3.16, $P < .001$; week 2: -6.35, 95% CI, -9.95 to -2.74, $P = .001$; week 4: -4.50, 95% CI, -8.17 to -0.84, $P = .02$; and week 6: -4.27, 95% CI, -7.94 to -0.61, $P = .02$). These outcomes remained significant after evaluating potential moderating effects of between-group differences in baseline expectancy scores. Adverse events in both groups were generally mild.

Conclusions and relevance: Whole-body hyperthermia holds promise as a safe, rapid-acting, antidepressant modality with a prolonged therapeutic benefit.

Trial registration: clinicaltrials.gov Identifier: [NCT01625546](https://clinicaltrials.gov/ct2/show/study/NCT01625546).

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Berk M, Tye S, Walder K, McGee S.

JAMA Psychiatry. 2016 Oct 1;73(10):1095-1096. doi: 10.1001/jamapsychiatry.2016.1532.

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PMID: 27627577 No abstract available.

[Hyperthermia for Major Depressive Disorder?-Reply.](#)

Raison CL, Janssen CW, Lowry CA.

JAMA Psychiatry. 2016 Oct 1;73(10):1096-1097. doi: 10.1001/jamapsychiatry.2016.1917.

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