

Some depression sufferers may genetically respond to placebos

In a genome-wide association study examining the placebo and duloxetine response in major depressive disorder (MDD), researchers found an association near the gene *STAC1* and placebo response but did not find a genome-wide response to duloxetine.

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Duloxetine, often used as a first-line treatment for MDD [major depressive disorder], has been the subject of a few pharmacogenetic studies. These studies, among others, lead the researchers to think that genetic architecture dictates drug response in multiple ways.

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There was a notably high rate of placebo response in patients with MDD, which led to uncertainty about whether or not it was “disorder-specific or a common, inherent response phenotype observed across clinical diagnoses.”

Maciukiewicz and colleagues stated that evidence seems to suggest the existence of a genetic variation that contributes to the placebo response in multiple phenotypes.

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“In the placebo-treated subsample, we detected genome-wide significant findings with the strongest association found in rs76767803,” reported the researchers. They also found that people with different genotypes responded in significantly different ways.

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The researchers concluded that “these findings add important information to develop predictive clinical models of placebo and duloxetine response and should serve as stimulus for further validation including replication and functional studies.”

The GLP aggregated and excerpted this blog/article to reflect the diversity of news, opinion, and analysis. Read full, original post: [Genetics May Play Role in Response to Antidepressant Therapy](#)