

**Revista de  
Neuro - Psiquiatría**

Revista de Neuro-Psiquiatría

ISSN: 0034-8597

revista.neuro.psiquiatria@oficinas-  
upch.pe

Universidad Peruana Cayetano Heredia  
Perú

TOMASZ ROS, LESZEK

A CASE REPORT OF OBSTINATE GAMBLING ADDICTION - AUTHOR'S OWN  
EXPERIENCE

Revista de Neuro-Psiquiatría, vol. 70, núm. 1-4, 2007, pp. 124-134

Universidad Peruana Cayetano Heredia  
Lima, Perú

Available in: <http://www.redalyc.org/articulo.oa?id=372039390013>

- How to cite
- Complete issue
- More information about this article
- Journal's homepage in redalyc.org

redalyc.org

Scientific Information System

Network of Scientific Journals from Latin America, the Caribbean, Spain and Portugal

Non-profit academic project, developed under the open access initiative

## A CASE REPORT OF OBSTINATE GAMBLING ADDICTION - AUTHOR'S OWN EXPERIENCE

LESZEK TOMASZ ROŚ \*\*

### ABSTRACT

*Some authors regard gambling as addiction. Detailed psychiatric examination revealed obsessive-compulsive syndrome in patient. The author treated the patient systematically with individual psychotherapy and sertraline from low doses up to the maximal dose (i.e. about 200 mg daily). A complete remission of the obsessive-compulsive syndrome was achieved [23, 12, 11, 6, 31]. A number of indirect proofs [6] demonstrate a significant role of sertraline in the aetiology of obsessive-compulsive syndrome. The most important evidence [6] is the effectiveness of the drugs from the group of selective inhibitors of serotonin central reuptake (SI-5HT) in the treatment of obsessive-compulsive syndrome. Sertraline is safe and effective [6] in the treatment of obsessive-compulsive syndrome. Very numerous authors [23, 12, 11, 6, 31] have used sertraline in the treatment of this syndrome with evidently good effect. Drug doses ranged from 50 to 200 mg daily.*

Key words: Gambling, addiction, obsessive-compulsive syndrome, sertraline.

A case report of obstinate gambling addiction - author's own experience

Correspondence: Leszek Tomasz Roś M  
D Poland 01-697 Warszawa ul. Zabłocińska  
6 m 55 phone: 8334979

Gambling is one of the very well known faults of some people. Some authors regard gambling as addiction. It leads in most cases to slow deterioration of a human being, to loss of money, not infrequently to selling of

house furniture necessary for living and even to selling of whole appartments and houses. Gambling is not infrequently the cause of bankruptcy, leading whole family to poverty and extreme destitution. It is commonly known that men succumb to gambling far more frequently than women. Gambling often draws people for very long periods of life - these periods may frequently last for several to several scores of years. Gambling takes various forms worldwide, from card

---

\* Central University Teaching Hospital with Polyclinic, Armed Forces School of Medicine Independent Public Health Care Institution

\*\* Department of Neurosurgery with Outpatient Clinic Head: Professor Jan Krzysztof Podgórski. MD, PhD Private Practice.  
Adress autora: Leszek Tomasz Roś ol. Zabłocińska 6m. 55 01- 697 Warszawa.

playing for money to various gambles, e.g. roulette. A characteristic feature of gambling addiction is the fact that it is always connected with playing for money. At the beginning of the addiction particularly dangerous for the possible future gambler is frequent winning in consecutive plays and rapid gathering of money. In such cases, gambling draws in a victim, that is gambling addiction develops rapidly and permanently. Rapidly growing sum of won money excites, encourages, intrigues, tempts, improves mood and frequently brings euphoria. Then other important matters in life become less interesting and slowly cease to count. Frequently, family, occupational work, various lofty aims in life become for a beginner gambler completely unimportant.

### Case report

Male patient K.K., aged 50 years never received any psychiatric treatment. The patient was born after normal pregnancy and labour. His childhood was moderately successful. The patient's mother was tender, considerate, warm, affective and caring. The father was extremely busy with his occupational work and, therefore, had very little time for his family. Besides that he was rather peremptory, stand-offish, emotionally cold, resolutely imposing his will, with irascible moods, frequently verbally aggressive. Very frequently he used to make small rows over trifles. The patient has two younger sisters with whom, similarly as with his mother, he has very good and heartfelt contacts. His mother is alive, the father died two years ago. In primary school and secondary technical school the patient achieved medium results but he never repeated years. He got married at the age of 24. Presently the patient has one adult daughter who has a decent husband and a child. No mental diseases occurred in the patient's family. The patient gave no history of head trauma and loss of consciousness. He was never abusing alcohol. Out of serious somatic diseases, the patient has received

medical treatment for chronic coronary artery disease. His marriage for the first 3-4 years was definitely good. His wife was very hard working, affective, warm, conscientious, caring. For the first 3-4 years the patient had no secrets from his wife. He worked hard as technician mechanic and spent much time with his wife and daughter. Then, patient's gambling became the curse of further life of the couple. After his colleagues' invitation he went to a club to play roulette. The initial series of consecutive winnings and quite great sum of money gathered became the cause of unhappiness of the patient and his family. For the first several months he managed to conceal his addiction from his wife. The patient, since that time, has been feeling a strong obsessive compulsion to go to the club to play roulette. The temptation was much stronger than logical, reasonable thinking. The patient for all these years has had a critical attitude towards his addiction. He has always thought that his gambling is without any sense. Soon his wife learned the truth. The patient no longer concealed his addiction. Several scores of times a day he had obsessive thoughts to go to the club to play roulette. His compulsory going to the club for roulette was regarded by the author as compulsion, i.e. realization of obsessive thoughts. The whole of these manifestations formed chronic obsessive-compulsive syndrome. The patient was losing money ever more often. He sold his car and expensive furniture from his apartment. He was fired from his job since he stole his firm's money to pay debts assumed for paying consecutive roulette losses. He gave his wife no money. His wife's earnings were insufficient to make the ends meet. The patient moved then to his still young parents who supported him and watched that he was not going to play roulette, but this situation humiliated the patient very much. He was guarded by his parents but obsessive thoughts and strong temptation caused that he was clandestinely going out to the club where he continued to play

roulette. The formal and emotional contacts with the patient were very good, affective. His current of thoughts was logical, normal. The mood was slightly depressed adequately to patient's living situation. He denied any suicidal ideation. He had numerous obsessive thoughts changing into compulsion. Detailed psychiatric examination revealed obsessive-compulsive syndrome. This diagnosis was confirmed by the following scales [23, 12]:

- ICD-10 scale
- Yale-Brown Obsession Scale
- Obsession and Compulsion Scale of the National Institute of Mental Health
- NIMH Global Scale of Obsession and Compulsion
- MAUDSLEY Obsession and Compulsion Inventory

Laboratory tests:

- basic laboratory blood and urine analyses gave normal results
- chest radiogram was normal,
- ECG record: medium-degree anteroinferior wall ischaemia in the form of T-wave flattening,
- EEG record was normal,
- eye fundus examination: normal,
- neurological examination: no focal and meningeal symptoms,
- physical examination was normal,
- cranial computed tomography: normal

The author treated the patient systematically with individual psychotherapy and sertraline from low doses up to the maximal dose (i.e. about 200 mg daily). A complete remission of the obsessive-compulsive syndrome was achieved [23, 12, 11, 6, 31].

## Discussion

Sertraline [31] is a selective serotonin central reuptake inhibitor. A number of indirect proofs [6] demonstrate a significant role of sertraline in the aetiology of obsessive-compulsive syndrome. The most important evidence [6] is the effectiveness of the drugs from the group of selective inhibitors of serotonin central reuptake (SI-5HT) in the treatment of obsessive-compulsive syndrome. Sertraline is safe and effective [6] in the treatment of obsessive-compulsive syndrome. Very numerous authors [23, 12, 11, 6, 31] have used sertraline in the treatment of this syndrome with evidently good effect. Drug doses ranged from 50 to 200 mg daily.

However, most authors think that sertraline doses in the treatment of obsessive-compulsive syndrome should be significantly higher than the doses of the drug administered in the treatment of "major depression". Some authors [34] believe that 50 mg daily is sometimes the optimal dose in the treatment of major depression. Other authors [28, 30] prefer sertraline doses of about 100-150 mg daily in the treatment of major depression.

However, many authors [23, 12, 11, 6, 31] think that for effective treatment of obsessive-compulsive syndrome higher sertraline doses are needed, about 150-200 mg daily. Sertraline is a very safe drug [31] and is well tolerated by patients. Therefore, it turned out to be useful in the described patient who has been suffering from chronic coronary artery disease.

## REFERENCES

- [1] *Authors:*  
Aguglia E., Casacchia M., Cassano G.B.  
*Institution:*  
University of Trieste, Italy  
*Title:*  
Double-blind study of the efficacy and safety of sertraline versus fluoxetine in major depression.  
Porównanie skuteczności i bezpieczeństwa stosowania sertraliny i fluoksetyny w leczeniu dużej depresji, badanie z wykorzystaniem podwójnie ślepej próby.  
*Source*  
International Clinical Psychopharmacology. 8(3): 197-202, 1993 Fall  
*podczas podawania prednisonu przy pomocy sertraliny.*  
*Source:*  
Journal of Child and Adolescent Psychopharmacology. 8 (3): 187-93, 1998
- [2] *Authors:*  
Bennie E.H., Mullin J.M., Martindale J.J.  
*Institution:*  
Leverndale Hospital, Glasgow, UK  
*Title:*  
A double-blind multicenter trial comparing sertraline and fluoxetine in outpatients with major depression.  
Porównanie fluoksetyny i sertraliny w grupie chorych z dużą depresją leczonych ambulatoryjnie, badanie wieloośrodkowe z wykorzystaniem metody podwójnie ślepej.  
*Source*  
Journal of Clinical Psychiatry. 56 (6): 229-37, 1995 Jun.
- [3] *Authors:*  
Beshay H., Pumarega A.J.  
*Institution:*  
James H. Quillen College of Medicine, East Tennessee State University, Quillen/Mountain Home Veterans Administration Medical Center, Johnson City 37684, USA  
*Title:*  
Sertraline treatment of mood disorder associated with prednisone: a case report.  
Leczenie zaburzeń nastroju występujących
- [4] *Authors:*  
Biri H., Isen K., Sinik Z.  
*Institution:*  
Department of Urology, Medical School of Gazi University, Ankara, Turkey  
*Title:*  
Sertraline in the treatment of premature ejaculation: a double-blind placebo-controlled study.  
Skuteczność sertraliny w leczeniu przedwczesnego wytrysku: badania metodą podwójnie ślepej próby z wykorzystaniem grupy kontrolnej placebo.  
*Source:*  
International Urology and Nephrology, 30 (5): 611-5, 1998
- [5] *Authors:*  
Brady K.I., Sonne S.C., Roberts J.M.  
*Institution:*  
Department of Psychiatry and Behavioral Sciences, Medical University of South Carolina, Charleston 29426, USA  
*Title:*  
Sertraline treatment of comorbid post-traumatic stress disorder and alcohol dependence.  
Leczenie sertralina w przypadku współwystępowania zespołu stresu pourazowego i uzależnienia od alkoholu.  
*Source:*  
Journal of Clinical Psychiatry. 56 (11): 502-5, 1995 Nov.
- [6] *Authors:*  
Chouinard G.  
*Institution:*  
Department of Psychiatry, University of

- Montreal, Hospital Louis H. Lafontaine, Quebec, Canada  
*Title:*  
Sertraline in the treatment of obsessive-compulsive disorder: two double-blind, placebo-controlled studies. [Review] [40 refs]  
Leczenie zespołu obsesyjno-kompulsyjnego przy użyciu sertraliny: badanie z użyciem podwójnie ślepej próby i kontroli placebo.  
*Source:*  
International Clinical Psychopharmacology. 7 Suppl. 2: 37-41, 1992 Oct.
- [7] *Authors:*  
Croft H., Settle E.Jr., Houser T.  
*Institution:*  
Charleston Area Medical Center, West Virginia, USA  
*Title:*  
A placebo-controlled comparison of the antidepressant efficacy and effects on sexual functioning of sustained-release bupropione and sertraline.  
Porównanie skuteczności działania przeciwdepresyjnego i wpływu na funkcje seksualne bupropionu o przedłużonym uwalnianiu i sertraliny, badanie z użyciem kontroli placebo.  
*Source:*  
Clinical Therapeutics. 21 (4): 643-58, 1999 Apr.
- [8] *Authors:*  
Davis S.M., Harrison W.M., Keller M.B.  
*Institution:*  
Rhode Island Hospital and Brown University, Providence 02903, USA  
*Title:*  
The treatment of chronic depression, part 3: psychosocial functioning before and after treatment with sertraline or imipramine.  
Leczenie przewlekłej depresji część 3: funkcjonowanie psychospołeczne przed leczeniem sertralina lub imipraminą i po jego zakończeniu.
- Source:*  
Journal of Clinical Psychiatry. 59 (11): 608-19, 1998 Nov.
- [9] *Authors:*  
Ekselius L., von Knorring L.  
*Institution:*  
Department of Neuroscience, Psychiatry, University Hospital, Uppsala, Sweden  
*Title:*  
Personality disorder comorbidity with major depression and response to treatment with sertraline or citalopram.  
Zaburzenia osobowości współwystępujące z dużą depresją a skuteczność leczenia sertralina lub citalopramem.  
*Source:*
- [10] *Authors:*  
Finkel S.L., Richter E.M., Clary C.M.  
*Institution:*  
Northwestern University Medical School, Department of Psychiatry and Behavioral Sciences, Chicago, IL 60611-3317, USA  
*Title:*  
Comparative efficiency and safety of sertraline versus nortriptyline in major depression in patients 70 and older.  
Porównanie skuteczności i bezpieczeństwa sertraliny i nortryptyliny w grupie chorych w wieku 70 i więcej lat.  
*Source:*  
International Psychogeriatrics. 11 (1): 85-99, 1999 Mar.
- [11] *Authors:*  
Griest J., Chouinard B., DuBoff B.  
*Institution:*  
Dean Foundation for Health, Research, and Education, Madison, Wis., USA  
*Title:*  
Double-blind parallel comparison of three dosages of sertraline and placebo in outpatients with obsessive-compulsive disorder.  
Porównanie trzech dawek sertraliny i placebo w leczeniu ambulatoryjnym chorych

z zespołem obsesyjno-kompulsyjnym; badania z użyciem podwójnie ślepej próby.

*Source:*

Archives of General Psychiatry. 52 (4): 289-96, 1995 Apr.

[12] *Authors:*

Greist J.H., Jefferson J.W., Kobak K.A.

*Institution:*

Dean Foundation for Health, Research and Education, Madison, WJ 53/17, USA

*Title:*

A 1 year double-blind placebo-controlled fixed dose study of sertraline in the treatment of obsessive-compulsive disorder.

Trwające rok badanie skuteczności sertraliny stosowanej w stałej dawce, w leczeniu zespołu obsesyjno-kompulsyjnego, z wykorzystaniem podwójnie ślepej próby i kontroli placebo.

*Source:*

International Clinical Psychopharmacology. 10 (2): 57-65, 1995 Jun.

[13] *Authors:*

Grignaschi G., Samanin R.

*Institution:*

Instituto di Ricerche Farmacologiche Mario Negri, Milan, Italy

*Title:*

Role of serotonin receptors in the effects of sertraline on feeding behaviour.

Wpływ sertraliny na zachowanie związane z przyjmowaniem pokarmów - rola receptorów serotoninowych.

*Source:*

Psychopharmacology. 110 (1-2): 203-8, 1993

[14] *Authors:*

Hirschfeld R.M., Russell J.M. Delgado P.L.

*Institution:*

Department of Psychiatry and Behavioral Sciences, University of Texas Medical Branch at Galveston 77555-0429, USA

*Title:*

Predictors of response to acute treatment

of chronic and double depression with sertraline or imipramine.

Czynniki pozwalające na przewidywanie reakcji na ostrą fazę leczenia sertralina lub imipraminą u chorych z przewlekłą lub podwójną depresją.

*Source:*

Journal of Clinical Psychiatry. 59 (12): 669-75, 1998 Dec.

[15] *Authors:*

Jerman D.M., Preece C.K., Syles R.L.

*Institution:*

Department of Pharmacy, Scott and White Memorial Hospital, Temple, Tex., USA

*Title:*

Luteal phase sertraline treatment for premenstrual dysphoric disorder. Results of a double-blind, placebo-controlled, cross-over study.

Podawanie sertraliny w fazie lutealnej cyklu w leczeniu zespołu dysforii przedmiesiączkowej. Wyniki krzyżowego badania z wykorzystaniem podwójnie ślepej próby i kontroli placebo.

*Source:*

Archives of Family Medicine. 8 (4): 328-32, 1999 Jul-Aug.

[16] *Authors:*

Kant R., Smith-Seemiller L., Zeiler D.

*Institution:*

Head Injury Clinic, St. Francis Medical Center, Pittsburgh, PA 15524, USA

*Title:*

Treatment of aggression and irritability after head injury.

Leczenie agresji i drażliwości u osób, które doznały urazu głowy.

*Source:*

Brain Injury. 12 (8): 661-6, 1998 Aug.

[17] *Authors:*

Katzelnick D.J., Kobak K.A., Greist J.H.

*Institution:*

Foundation for Health, Research and Education, Madison, WJ 53/17, USA

- Title:*  
Sertraline for social phobia: a double-blind, placebo-controlled cross-over study.  
Leczenie fobii społecznej przy użyciu sertraliny, krzyżowe badanie z użyciem podwójnie ślepej próby i kontroli placebo.  
*Source:*  
American Journal of Psychiatry. 152 (9): 1368-71, 1995 Sep.
- [18] *Authors:*  
Kavoussi R.J., Coccaro E.F.  
*Institution:*  
Department of Psychiatry, Medical College of Pennsylvania, Eastern Pennsylvania Psychiatric Institute, Philadelphia 19129  
*Title:*  
An open trial of sertraline in personality disorder in patients with impulsive aggression. Otwarte badania sertraliny u pacjentów z zaburzeniami osobowości z towarzyszącą impulsywną agresją.  
*Source:*  
Journal of Clinical Psychiatry. 55 (4): 137-41, 1994 Apr.
- [19] *Authors:*  
Keller M.B., Gelenberg A.J., Hirschfeld R.M.  
*Institution:*  
Department of Psychiatry and Human Behavior, Butler Hospital, Brown University, Providence, RI 02912, USA  
*Title:*  
The treatment of chronic depression, part 2: a double-blind, randomized trial of sertraline and imipramine.  
Leczenie przewlekłej depresji część 2: porównanie skuteczności sertraliny i imipraminy z wykorzystaniem podwójnie ślepej próby i losowym podziałem na grupy.  
*Source:*  
Journal of Clinical Psychiatry. 59 (11): 598-607, 1998 Nov.
- [20] *Authors:*  
Keller M.B., Harrision W., Fawcett J.A.  
*Institution:*  
Butler Hospital, Brown. University, Providence, RI 02912, USA  
*Title:*  
Treatment of chronic depression with sertraline or imipramine: preliminary blinded response rates and high rates of undertreatment in the community.  
Leczenie przewlekłej depresji sertralina lub imipramina: wstępne dane dotyczące odsetka reakcji oraz duża częstość nieodpowiedniego leczenia w warunkach podstawowej opieki medycznej.  
*Source:*  
Psychopharmacology Bulletin. 31 (2): 205-12, 1995
- [21] *Authors:*  
Keller M.B., Kocsis J.H., Thase M.  
*Institution:*  
Department of Psychiatry, Butler Hospital, Brown University, Providence, RI 02906, USA  
*Title:*  
Maintenance phase efficacy of sertraline for chronic depression: a randomized controlled trial.  
Skuteczność podtrzymującego leczenia sertralina u chorych z depresją przewlekłą: badania kontrolowane z losowym podziałem na grupy.  
*Source:*  
JAMA. 280 (19): 1665-72, 1998 Nov 18
- [22] *Authors:*  
Kirli S., Caliskan M.  
*Institution:*  
Department of Psychiatry, Uludag University Medical Faculty, Bursa, Turkey  
*Title:*  
A comparative study of sertraline versus imipramine in postpsychotic depressive disorder of schizophrenia.  
Porównawcze badania sertraliny i imipraminy w leczeniu depresji popsychotycznej u chorych na schizofrenię.  
*Source:*



Schizophrenia research. 33 (1-2), 1998 Sep 7

[23] *Authors:*

Kroning M.H., Apter J., Asnis G.

*Institution:*

Department of Psychiatry, Millside Hospital of LIJMC, Glen Oaks, New York, USA

*Title:*

Placebo-controlled, multicenter study of sertraline treatment for obsessive-compulsive disorder.

Wieloośrodkowe badanie skuteczności leczenia zespołu natręctw przy użyciu sertraliny z wykorzystaniem kontroli placebo.

*Source:*

Journal of Clinical Psychopharmacology. 19 (2): 172-6, 1999 Apr.

[24] *Authors:*

Lambert M.T., Trutia C., Petty F.

*Title:*

Extrapyramidal adverse effects associated with sertraline.

Pozapiramidowe objawy niepożądane związane ze stosowaniem sertraliny.

*Source:*

Progress in Neuro-Psychopharmacology and Biological Psychiatry. 22 (5): 741-8, 1998 Jul.

[25] *Authors:*

Lauterbach E.C.

*Institution:*

Department of Psychiatry and Behavioral Sciences, Mercer University School of Medicine, Macon, Georgia, USA

*Title:*

Catatonia - like events after valproic acid with risperidone and sertraline.

Wystąpienie objawów o typie katatonii po łącznym podaniu kwasu walproinowego, risperidonu i sertraliny.

*Source:*

Neuropsychiatry, Neuropsychology and Behavioral Neurology. 11 (3): 157-63, 1998 Jul

[26] *Authors:*

Levin I.D., Briggs S.J., Christopher N.C.

*Institution:*

Department of Psychiatry, Duke University, Durham, NC 27710

*Title:*

Sertraline attenuates hyperphagia in rats following nicotine withdrawal.

Sertralina hamuje nadmierny apetyt u szczurów, którym odstawiono nikotynę.

*Source:*

Pharmacology, Biochemistry and Behavior, 44 (1): 51-61, 1993 Jan.

[27] *Authors:*

Londborg P.D., Wokow R., Smith W.T.

*Institution:*

Summit Research Network, Seattle, Washington 98104, USA

*Title:*

Sertraline in the treatment of panic disorder. A multi-site, double-blind, placebo-controlled, fixed-dose investigation.

Leczenie zespołu lęku napadowego przy użyciu sertraliny. Badanie wieloośrodkowe z wykorzystaniem podwójnie ślepej próby, kontroli placebo i stałej dawki leku.

*Source:*

British Journal of Psychiatry. 173: 54-60, 1998 Jul.

[28] *Authors:*

Luketsos G.G., Taragano F., Freisman G.J.

*Institution:*

Neuropsychiatry and Memory Group, John Hopkins University, Baltimore, MD, USA

*Title:*

Major depression and its response to sertraline in primary care vs. Psychiatric office practice patients, results of an open-label trial in Argentina.

Leczenie dużej depresji przy pomocy sertraliny - porównanie wyników uzyskiwanych w praktyce ogólnej oraz w poradniach psychiatrycznych. Wyniki badania otwartego przeprowadzonego w Argentynie.

- [29] *Authors:*  
McMahon D.G.  
*Institution:*  
St. Luke's Hospital Complex, Sydney, Austria  
*Title:*  
Treatment of premature ejaculation with sertraline hydrochloride.  
Leczenie przedwczesnego wytrysku przy pomocy chlorowodoru sertraliny.  
*Source:*  
International Journal of Impotence Research. 10 (3): 181-4, discussion 185, 1998 Sep.
- [30] *Authors:*  
Moller H.J., Gallinat J., Hegerl U.  
*Institution:*  
Psychiatric Hospital, Ludwig Maximilians University, Munich, Germany  
*Title:*  
Double-blind, multicenter comparative study of sertraline and amitriptyline in hospitalized patients with major depression.  
Porównanie skuteczności sertraliny i amitriptyliny w grupie hospitalizowanych chorych z dużą depresją, badanie wieloośrodkowe, z wykorzystaniem metody podwójnie ślepej próby.  
*Source:*  
Pharmacopsychiatry. 31 (6): 170-7, 1998 Sep.
- [31] *Authors:*  
Murdoch D., McTavish D.  
*Institution:*  
Adis International Limited, Auckland, New Zealand  
*Title:*  
Sertraline. A review of its pharmacodynamic and pharmacokinetic properties, and therapeutic potential in depression and obsessive compulsive disorder. [Review][72 refs]  
Sertralina. Przegląd właściwości farmakologicznych i farmakokinetycznych oraz skuteczność w leczeniu depresji i zespołu
- obsesyjno-kompulsyjnego.  
*Source:*  
Drugs. 44 (4): 604-24, 1992 Oct.
- [32] *Authors:*  
Oinan T.G.  
*Institution:*  
Department of Psychological Medicine, St. Bartholomew's Hospital, London, United Kingdom  
*Title:*  
Lithium augmentation in sertraline - resistant depression: a preliminary dose - response study.  
Dołączenie kuracji litem u chorych z depresją oporną na leczenie sertralina: wstępne badanie związku reakcji z dawką.  
*Source:*  
Psychiatria Scandinavica. 88 (4): 300-1, 1993 Oct.
- [33] *Authors:*  
Pollack M.H., Otto M.W., Worthington J.J.  
*Institution:*  
Anxiety Disorders Program, Department of Psychiatry, Massachusetts General Hospital, Boston 02114-3117, USA  
*Title:*  
Sertraline in the treatment of panic disorder: a flexible-dose multicenter trial.  
Sertralina w leczeniu zespołu lęku napadowego: badanie wieloośrodkowe z użyciem zmiennych dawek.  
*Source:*  
Archives of General Psychiatry. 55 (11): 1010-6, 1998 Nov.
- [34] *Authors:*  
Preskorn S.H., Lane R.M.  
*Institution:*  
Department of Psychiatry and Behavioral Sciences, University of Kansas School of Medicine, Wichita 67214, USA  
*Title:*  
Sertraline 50 mg daily: the optimal dose in the treatment of depression. [Review] [55 refs]

- Sertralina w dawce 50 mg/d: optymalna dawka w leczeniu depresji.  
*Source:*  
 International Clinical Psychopharmacology. 10 (3): 129-41, 1996 Sep.
- [35] *Authors:*  
 Roy A.  
*Institution:*  
 Psychiatry Service, Department of Veterans Affairs Medical Center, East Orange, NJ 07019, USA  
*Title:*  
 Placebo - controlled study of sertraline in depressed recently abstinent alcoholics.  
 Ocena skuteczności sertraliny w grupie osób od niedawna zachowujących abstynencję od alkoholu; badanie z wykorzystaniem grupy kontrolnej placebo.  
*Source:*  
 Biological Psychiatry. 44 (7): 633-6, 1998 Oct 1
- [36] *Authors:*  
 Rush A.J., Koran L.M., Keller M.B.  
*Institution:*  
 Department of Psychiatry, University of Texas Southwestern Medical Center, Dallas 75235-9086, USA  
*Title:*  
 The treatment of chronic depression, part 1: Study design and rationale for evaluating the comparative efficacy of sertraline and imipramine as acute, crossover, continuation and maintenance phase therapies.  
 Leczenie depresji przewlekłej, część 1: plan badania i uzasadnienie porównawczej oceny skuteczności sertraliny i imipraminy jako kuracji ostrych, kontynuowanych i podtrzymujących.  
*Source:*  
 Journal of Clinical Psychiatry. 59 (11): 589-97, 1998 Nov.
- [37] *Authors:*  
 Shapiro P.A., Lesperance F., Frasure-Smith N.  
*Institution:*  
 Department of Psychiatry, Columbia University College of Physicians and Surgeons, New York, NY 10032, USA  
*Title:*  
 An open-label preliminary trial of sertraline for treatment of major depression after acute myocardial infarction.  
 Otwarte, wstępne badanie skuteczności sertraliny w leczeniu dużej depresji u chorych po ostrym zawale mięśnia sercowego.
- [38] *Authors:*  
 Turner R.  
*Institution:*  
 Pfizer Central Research, Groton, CT  
*Title:*  
 Quality of life: experience with sertraline.  
 Jakość życia: doświadczenia z sertralina.  
*Source:*  
 International Clinical Psychopharmacology. 9 Suppl 3: 27-31, 1994 Jun.
- [39] *Authors:*  
 Turner R.  
*Institution:*  
 USC-LAC Medical Center 90033, USA  
*Title:*  
 Sertraline in social phobia.  
 Sertralina w fobii społecznej  
*Source:*  
 Anxiety. 1(4): 196-8, 1994-95
- [40] *Authors:*  
 Wadden T.A., Bartlett S.J., Foster G.D.  
*Institution:*  
 Dept. of Psychiatry, University of Pennsylvania School of Medicine, Philadelphia 19104, USA  
*Title:*

Sertraline and relapse prevention training following treatment by very-low-calorie diet: a controlled clinical trial.

Sertralina i trening zapobiegania nawrotom stosowane po leczeniu przy pomocy diety

o bardzo małej zawartości kalorii: kontrolowana próba kliniczna.

*Source:*

Obesity Research. 3 (6): 549-57, 1995 Nov.