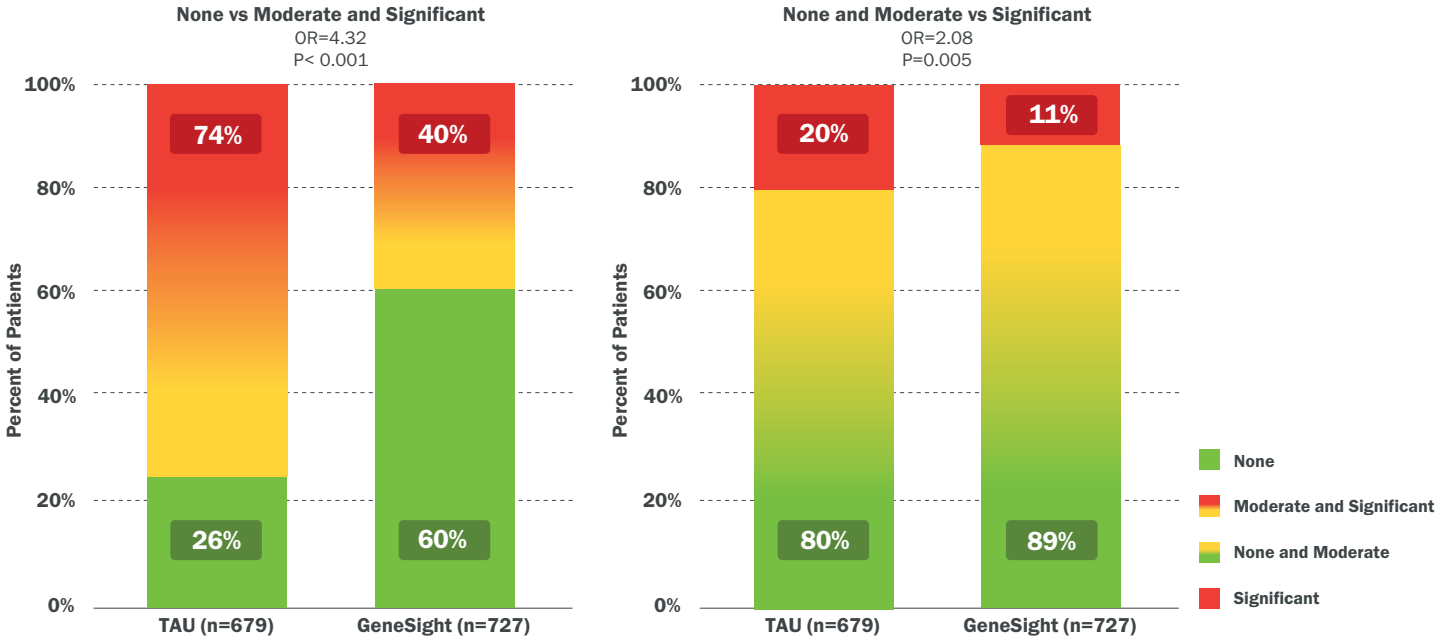
Access to the GeneSight Psychotropic test is shown to improve depression remission rates

PRIME Care study design: The PRIME Care study evaluated the impact of the GeneSight Psychotropic test on psychiatric treatment outcomes and medication selection in veteran patients with major depressive disorder (MDD). Patients with moderate to severe depression that had at least one prior treatment exposure for MDD were included. Funded by the U.S. Department of Veteran Affairs with in-kind testing provided by Myriad Genetics, PRIME Care is the largest pharmacogenomic randomized controlled trial in mental health and included 1,944 US veteran patients at 22 different VA study sites.

Key findings of the PRIME Care study

1. The treatment as usual (TAU) arm was significantly more likely to be prescribed antidepressants with significant gene-drug interactions

Among patients who received an antidepressant prescription within the first 30 days after randomization, **patients in the TAU arm were approximately two times more likely to receive an antidepressant with significant gene-drug interactions.**



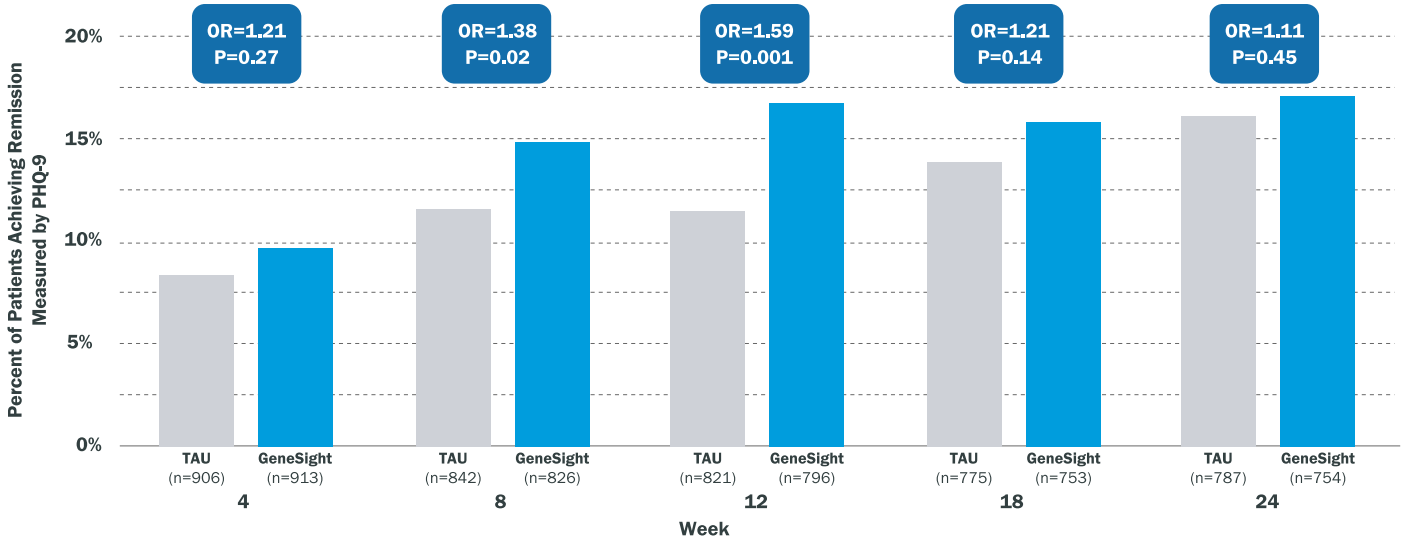
Not all patients who receive the GeneSight Psychotropic test will be prescribed medications with no or moderate gene-drug interactions, and not all will see improvements in symptoms, achieve response, or achieve remission.

2. Access to the GeneSight test results significantly improved remission rates compared to TAU

The GeneSight arm had a statistically significant **28% greater likelihood of achieving remission** compared to the TAU arm over 24 weeks.

Remission (PHQ-9 score ≤ 5)

Overall: OR=1.28, P=0.02



There was no significant group x time interaction (p=0.08)

Results for individual timepoints should be interpreted as exploratory.

3. The secondary endpoints of response and symptom improvement followed a similar pattern of significant improvement in the GeneSight arm compared to the TAU arm

For more information on this study, contact the GeneSight Medical Information department at:

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Oslin DW, et al. Effect of Pharmacogenomic Testing for Gene-Drug Interactions on Medication Selection and Remission of Symptoms in Major Depressive Disorder. JAMA, 2022; 328(2):151-161. https://doi.org/10.1001/jama.2022.9805