Deep TMS
CASE STUDY

59-Year-Old Female Presenting with Severe Depression and Moderate Anxiety
When patients do not respond well to ANTIDEPRESSANTS there is ANOTHER OPTION...

It is estimated that 20-40% of patients do not benefit adequately from pharmacotherapy and psychotherapy;¹ it is for these patients that dTMS therapy is intended.

Deep TMS (dTMS) differs from standard TMS in that the magnetic pulse is able to reach much deeper areas of the brain directly rather than through propagation. These stimulations are able to produce excitations and/or inhibition of neurons deep inside the limbic areas of the brain, which impact mood regulation and motivation.

dTMS is well tolerated with few side effects, and there is never memory or cognitive impairment secondary to dTMS.

Deep TMS (dTMS) sessions can vary from 1-2 times per week for 4-8 weeks, after which frequency can be tapered. The patient’s appointment frequency is determined based on the patient’s treatment response.


CASE STUDY

A 59-year-old female was referred to TMS Center of Colorado by her psychiatrist. She presented with severe depression and moderate anxiety, reported strong suicidal ideation, excessive crying and feelings of sadness. She had been hospitalized three times for mental health reasons.

The patient’s treatment prior to her arrival at TMS included counseling (approximately 15 years), six sessions of electrocompulsive therapy (ECT), the aforementioned hospitalizations and multiple medication trials. Her past unsuccessful drug therapy included: Mirtazapine; Lamotrigine; Topiramate; Ability; Thyroxine; and Acamprosate.

Upon psychiatric evaluation at our center, the patient’s BDI® II score (Beck Depression Inventory® II Index) was 34, putting her in the significant depression category, and her BAI® score was 22, putting her in the moderate anxiety category.

The patient initially received a total of 38 Brainsway® dTMS sessions over a period of eight weeks; fast/left-sided stimulations only. After 38 sessions, the patient’s BDI II decreased to 6 and her BAI decreased to 2, indicating “normal ups and downs,” and a remission of both depression and anxiety.

The patient reported that due to Brainsway dTMS, “I have a quality of life now that I never could have believed would be possible. It’s a miracle that most of my days are positive and I feel grateful to be alive.” The patient continues to come in for maintenance sessions once every three weeks.

“I have a quality of life now that I never could have believed would be possible. It’s a miracle that most of my days are positive and I feel grateful to be alive.”