



THE JOURNAL OF CLINICAL PSYCHIATRY

THE OFFICIAL JOURNAL OF THE AMERICAN SOCIETY OF CLINICAL PSYCHOPHARMACOLOGY

Supplementary Material

Article Title: Effect of Zuranolone on Concurrent Anxiety and Insomnia Symptoms in Women With Postpartum Depression

Authors: Kristina M. Deligiannidis, MD; Leslie Citrome, MD, MPH; Ming-Yi Huang, PhD; Sarah Acaster, MSc; Moshe Fridman, PhD; Vijayveer Bonthapally, PhD; Robert Lasser, MD, MBA; and Stephen J. Kanes, MD, PhD

DOI Number: 10.4088/JCP.22m14475

List of Supplementary Material for the article

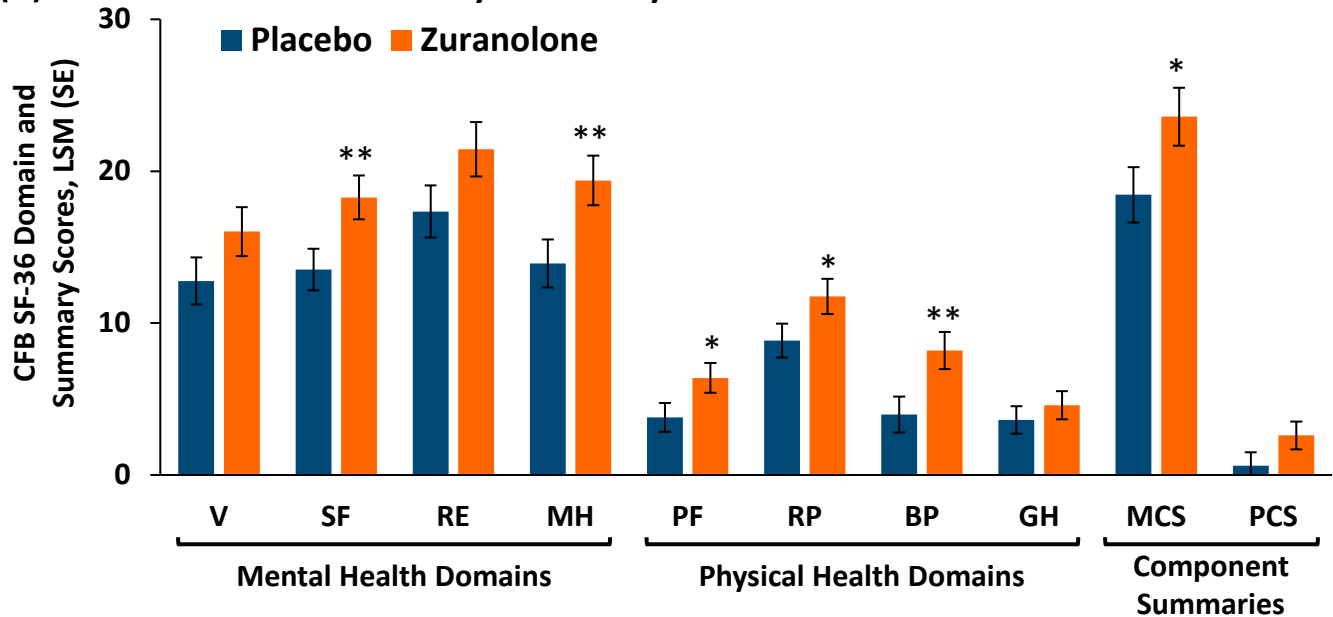
1. [Figure 1](#) Patients' Perceptions of Their Own Functional Health and Well-being as Reported on the SF-36v2
2. [Table 1](#) Summary of NNT Estimates for HRDS-17 Response, Remission, and Sustained Response and Remission and NNH Estimates for Discontinuation Due to AE and Specific TEAEs ($\geq 2\%$ Incidence With Zuranolone and Greater Than That With Placebo).

Disclaimer

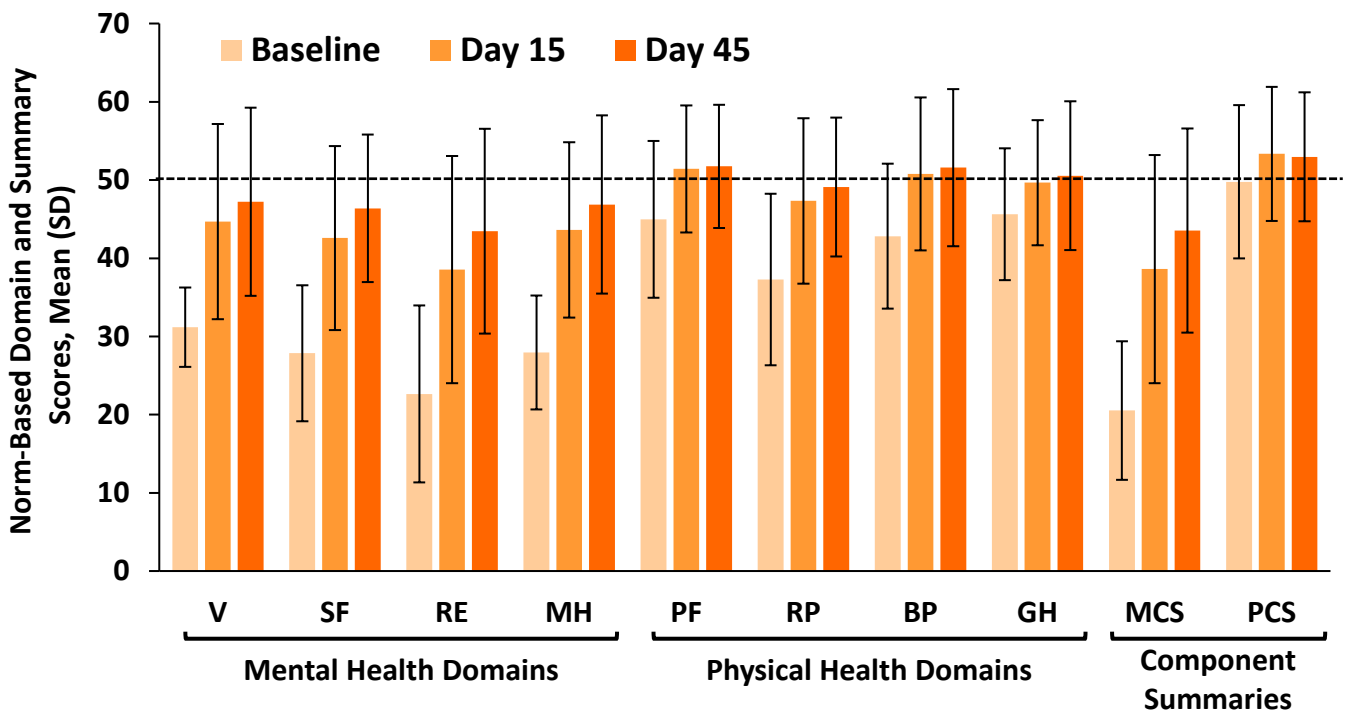
This Supplementary Material has been provided by the authors as an enhancement to the published article. It has been approved by peer review; however, it has undergone neither editing nor formatting by in-house editorial staff. The material is presented in the manner supplied by the author.

Supplementary Figure 1. Patients' Perceptions of Their Own Functional Health and Well-being as Reported on the SF-36v2. (A) Change From Baseline in Domain and Summary Scores at Day 45. (B) Mean Domain and Component Summary Scores at Baseline, Day 15, and Day 45 (in Patients Receiving Zuranolone Only).

(A) SF-36 Domain and Summary Scores Day 45



(B) Norm-Based SF-36 Domain and Summary Scores



* $P < .05$; ** $P < .01$ vs placebo. P values have not been adjusted for multiplicity and are nominal.

Abbreviations: BP = Bodily Pain; CFB = change from baseline; GH = General Health; LSM = least squares mean; MCS = Mental Component Score; MH = Mental Health; PCS = Physical Component Score; PF = Physical Functioning; RE = Role Emotional; RP = Role Physical; SD = standard deviation; SE = standard error; SF = Social Functioning; SF-36v2 = 36-Item Short Form Health Survey Instrument version 2; V = Vitality.

Supplementary Table 1. Summary of NNT Estimates for HDRS-17 Response, Remission, and Sustained Response and Remission and NNH Estimates for Discontinuation Due to AE and Specific TEAEs (≥2% Incidence With Zuranolone and Greater Than That With Placebo).

(A) NNT Estimates			
Outcome, n (%) ^a	Placebo (N = 74)	Zuranolone (N = 76)	Associated NNT (95% CI)
HDRS-17 response (day 15)	35 (47.9)	53 (71.6)	5 (3 to 13)
HDRS-17 remission (day 15)	17 (23.3)	33 (44.6)	5 (3 to 17)
Sustained HDRS-17 response (days 15/45)	27 (38.6)	44 (58.7)	5 (3 to 27)
Sustained HDRS-17 remission (days 15/45)	9 (12.7)	28 (37.3)	5 (3 to 10)
(B) NNH Estimates			
Outcome, n (%)	Placebo (N = 73)	Zuranolone (N = 78)	Associated NNH ^b
Treatment discontinuation due to AE	0	1 (1.3)	78
TEAE			
Somnolence	8 (11.0)	12 (15.4)	23
Dizziness	4 (5.5)	6 (7.7)	46
Sedation	0	4 (5.1)	20
Diarrhea	2 (2.7)	5 (6.4)	28
Dry mouth	0	3 (3.8)	26
Upper respiratory infection	1 (1.4)	6 (7.7)	16
Nasopharyngitis	1 (1.4)	3 (3.8)	41
Pain in extremity	1 (1.4)	2 (2.6)	84
Fatigue	1 (1.4)	3 (3.8)	41

^aPercentages were calculated using the numbers of patients with data evaluable at that day as denominator: N = 73 (placebo) and N = 74 (zuranolone) for HDRS-17 response and remission at day 15; N = 70 (placebo) and N = 75 (zuranolone) for sustained HDRS-17 response; and N = 71 (placebo) and N = 75 (zuranolone) for sustained HDRS-17 remission.

^bNot statistically significant versus placebo at the p<0.05 threshold.

Abbreviations: AE = adverse events; CI = confidence interval; HDRS-17 = 17-item Hamilton Depression Rating Scale; NNT = number needed to treat; NNH = number needed to harm; TEAE = treatment-emergent adverse event.