P-471 - EVALUATION OF POTENTIAL PREDICTORS OF RESPONSE TO TREATMENT WITH ADJUNCT EXTENDED RELEASE QUETIAPINE FUMARATE (QUETIAPINE XR) IN PATIENTS WITH MDD

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Introduction: Two 6-week, double-blind, placebo-controlled studies evaluated quetiapine XR (QTP-XR) adjunct to ongoing antidepressant therapy in patients with MDD and an inadequate response to prior antidepressant treatment (D1448C00006/D1448C00007).

Objective and aim: A post hoc pooled analysis examined clinical and demographic characteristics as potential predictors of response to adjunct QTP-XR.

Methods: Pooled MITT population (n=616 QTP-XR [both doses]; n=303 placebo) data were analysed from the two adjunct QTP-XR (150 or 300mg/day) studies. Effects of psychiatric history and baseline demographic and disease characteristics on efficacy were evaluated in subgroups based on Week 6 MADRS total score reduction: ≥50% reduction (responders: n=345 QTP-XR, n=140 placebo) versus < 50% (non-responders: n=271 QTP-XR, n=163 placebo); ≥75% reduction (responders: n=175 QTP-XR, n=60 placebo) versus < 25% (non-responders: n=125 QTP-XR, n=89 placebo).

Impact of baseline CGI-S score and number of episodes (0, 1, 2-3, 4-10, ≥10) over previous year and lifetime on Week 6 MADRS total score change was evaluated. Effect of baseline MADRS individual item (1-10) scores on Week 6 change in CGI-I score was evaluated.

Results: No major differences between responders and non-responders to QTP-XR were observed for patient characteristics. There was no predictive association between baseline CGI-S score, number of depressive episodes, and baseline MADRS item scores and efficacy outcomes for adjunct QTP-XR.

Conclusions: This pooled analysis showed no major differences between responders and non-responders, and no suggestion of a predictive association between the parameters assessed and efficacy outcomes for adjunct QTP-XR. Further investigation including logistic regression may be required.

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