**Introduction:** Cariprazine, a dopamine D₃/D₂ receptor partial agonist with preferential binding to D₃ receptors, is being developed for the treatment of schizophrenia.

**Objective:** To explore the effect of cariprazine on negative symptoms of schizophrenia.

**Methods:** Subjects aged 18-60 years with acute schizophrenia, current acute episode <2 weeks, and a PANSS total score ≥80 and ≤120 were randomly allocated in a 6-Week study NCT01104766 to cariprazine 3 mg/d, cariprazine 6 mg/d, aripiprazole 10 mg/d (active control), or placebo [1]. Post–hoc analyses were performed on subjects with severe negative symptoms and low-to-moderate positive symptoms, defined according to Marder.

**Results of the Post-Hoc Analyses:** Data of 26 subjects were included in the cariprazine 3 mg/d (17.2% of the total sample), 34 in the cariprazine 6 mg/d (22.1%), 35 in the aripiprazole (23.3%) and 35 in the placebo (23.5%) groups, respectively. Change from baseline to Week 6 in the PANSS Factor Score for Negative Symptoms (PFSNS) was statistically significant for cariprazine 6 mg/d versus placebo (least squares mean difference: cariprazine 3 mg/d = -2.15, \( p = 0.20 \); cariprazine 6 mg/d = -3.68, \( p =.019 \)). Cariprazine 6 mg/d was superior to placebo at each weekly assessment from Week 3. The changes in PFSNS for aripiprazole were not statistically significant at any weekly assessment.

**Conclusion:** Post–hoc analyses performed on subjects with acute schizophrenia, high level of negative symptoms and low-to-moderate positive symptoms, showed that the patients in the cariprazine 6 mg/d group had a significantly greater improvement relative to placebo on the PFSNS.