Sustained Treatment Response With Long-Term Valbenazine in Patients With Tardive Dyskinesia

Christoph U. Correll1,2,3, Jean-Pierre Lindenmayer4,5, Khody Farahmand6, Eric Jen6, Scott Siegert6 and Eduardo Dunayevich6

1Department of Psychiatry, The Zucker Hillside Hospital, Northwell Health; Glen Oaks, NY, USA, 2Departments of Psychiatry and Molecular Medicine, Donald and Barbara Zucker School of Medicine at Hofstra/Northwell; Hempstead, NY, USA, 3Department of Child and Adolescent Psychiatry, Charité Universitätsmedizin Berlin; Berlin, Germany, 4Nathan Kline Institute for Psychiatric Research at Manhattan Psychiatric Center; New York, NY, USA, 5Department of Psychiatry, NYU Grossman School of Medicine; New York, NY, USA and 6Neurocrine Biosciences, Inc.; San Diego, CA, USA

Abstract

Background. Valbenazine is a once-daily VMAT2 inhibitor approved for the treatment of tardive dyskinesia (TD), a persistent and potentially disabling movement disorder associated with prolonged exposure to antipsychotics, antiemetics, and other dopamine receptor blocking agents. The efficacy, safety, and tolerability of valbenazine has been established in several phase 3 trials, including a long-term study (KINECT 4 [NCT02405091]) in which participants received open-label valbenazine (40 or 80 mg) for 48 weeks. Post hoc analyses of KINECT 4 data were conducted to assess patterns of treatment response.

Methods. Data from KINECT 4 treatment completers (participants who reached the Week 48 visit and had the longest duration of treatment) were analyzed post hoc. TD was assessed using the Abnormal Involuntary Movement Scale (AIMS) total score (sum of items 1–7, as rated by the study investigator), the Clinical Global Impression of Change-Tardive Dyskinesia (CGI-TD), and the Patient Global Impression of Change (PGIC). Analyses were conducted at Week 8 (first study visit after the valbenazine dose-optimization period) and Week 48 using the following definitions of response: ≥50% and ≥70% improvement from baseline in AIMS total score; rating of "much improved" or "very much improved" (score ≤2) on the CGI-TD and PGIC.

Results. Of the 167 participants who entered KINECT 4, 103 (62%) were treatment completers and included for analysis. Of these 103 participants, 39% and 86% met the ≥50% AIMS response threshold at Weeks 8 and 48, respectively. The percentages of participants who met the highly rigorous AIMS ≥70% response threshold at Weeks 8 and 48 were 17% and 52%, respectively. Of the 40 participants with AIMS ≥50% total score improvement at Week 8, 95% also met this threshold at Week 48 ("sustained response"). Of the 63 participants with <50% AIMS improvement at Week 8, 81% achieved the ≥50% response threshold by end of treatment at Week 48. The proportion of participants meeting the threshold for CGI-TD response also increased over time, from 50% at Week 8 to 92% at Week 48. PGIC results were similar, with response rates of 53% and 88% at Weeks 8 and 48, respectively.

Conclusions. Post hoc analyses of data from a 48-week, open-label study of once-daily valbenazine showed that the proportion of participants meeting rigorous treatment response thresholds increased over time. By the end of treatment at Week 48, >80% of participants demonstrated robust improvements in TD, as assessed using the AIMS (≥50% improvement), CGI-TD (score ≤2), and PGIC (score ≤2).

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Assessing the Quality of a Telemental Health Training Initiative for Social Work Students to Reduce the Workforce Mental Health Crisis in the Child and Adolescent Population

Kimberly Bailey Dexter, DNP, APRN, PMHNP-BC, RDH, BS1 and Caroline Sutter, DNP, APRN, FNP-BC2

1Department of Psychiatry, Division of Child & Adolescent Psychiatry, Virginia Commonwealth University Health Systems, Richmond, VA, USA; Walden University, Minneapolis, MN, USA and 2George Mason University, Fairfax, VA, USA

Abstract

The Department of Psychiatry, Division of Child & Adolescent Psychiatry, Virginia Commonwealth University Health Systems, Richmond, VA, USA, partnered with Walden University, Minneapolis, MN, USA to develop and implement a telemental health training initiative aimed at social work students. The initiative was designed to address the workforce mental health crisis in the child and adolescent population.

Methods. The training initiative consisted of a comprehensive curriculum that included didactic lectures, supervised clinical experiences, and case-based learning activities. Social work students were enrolled in the program and provided with training on various topics related to telemental health, such as mental health assessment, treatment planning, and ethical considerations.

Results. The training initiative was well-received by the participating social work students. A pre- and post-training evaluation revealed an improvement in knowledge and confidence levels related to telemental health, as assessed using a standardized survey.

Conclusions. The telemental health training initiative for social work students demonstrated its feasibility and effectiveness in preparing professionals for the workforce mental health crisis in the child and adolescent population. Further research is needed to explore the long-term impact of the training on the mental health workforce and the delivery of care to this vulnerable population.

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