

EFFECT OF LURASIDONE ON WEIGHT AND METABOLIC PARAMETERS: A COMPREHENSIVE ANALYSIS OF SHORT- AND LONG-TERM TRIALS IN SCHIZOPHRENIA

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Introduction: Patients with schizophrenia are at high risk for diabetes, dyslipidemia, hypertension, and obesity, which can be exacerbated by some atypical antipsychotics.

Objectives: To evaluate the effect of lurasidone on weight and metabolic parameters.

Aims: To establish the cardiometabolic safety of lurasidone.

Methods: Short-term data were pooled from seven, double-blind, 6-week studies of subjects with acute exacerbation of schizophrenia treated with lurasidone 20-160 mg/day (N=1508); haloperidol 10 mg/day (N=72); olanzapine 15 mg/day (N=122); risperidone 4 mg/day (N=65); quetiapine XR 600 mg/day (N=119) or placebo (N=708). Long-term data (6-22 months) were pooled from patients treated with lurasidone 40-120 mg/day (flexibly dosed).

Results: Proportions of patients experiencing $\geq 7\%$ weight gain during short-term treatment were: lurasidone 4.8%, haloperidol 4.2%, olanzapine 34.4%, risperidone 6.2%, quetiapine XR 15.3%, and placebo 3.3%. Median lipid changes were: triglycerides (mg/dL), lurasidone -4.0, haloperidol -3.0, olanzapine +25.0, risperidone +4.0, quetiapine XR +9.5, and placebo -6.0; total cholesterol (mg/dL), lurasidone -5.0, haloperidol -8.0, olanzapine +9.0, risperidone +6.5, quetiapine XR +6.0, and placebo -5.0; trends were similar for LDL. Median changes in glucose (mg/dL) were similar for lurasidone (0.0) and placebo (0.0), and higher for haloperidol (+2.0), olanzapine (+4.0), risperidone (+3.0), and quetiapine XR (+3.0). Minimal-to-no changes in HbA1c were observed. With long-term lurasidone treatment, mean weight change after 12-month exposure was -0.73 kg and median metabolic changes were: -2.0 mg/dL for total cholesterol and -5.0 mg/dL for triglycerides.

Conclusions: Short- and long-term treatment with lurasidone showed minimal changes in weight and decrease in mean total and LDL cholesterol and triglycerides.