EVALUATION OF DYSLIPIDAEMIA RISK AMONG PATIENTS TREATED WITH ARIPIPRAZOLE: META ANALYSIS OF PLACEBO- AND OLANZAPINE-CONTROLLED STUDIES

H. Peyro-Saint-Paul1, J.-Y. Loze2, S. Kaplita1, J. Han3, R.A. Baker4, R. Cahn1, R. Owen3

1Bristol-Myers Squibb, 2Otsuka Pharmaceutical France, Paris, France, 3Bristol-Myers Squibb, Wallingford, 4Bristol-Myers Squibb, Princeton, USA

Aims: To evaluate dyslipidaemia risk among patients with schizophrenia treated with aripiprazole or olanzapine.

Methods: Pooled analysis of the aripiprazole clinical database, including studies of ≥7 days with at least an oral aripiprazole monotherapy arm. Mean changes from baseline to endpoint and shifts from normal to abnormal lipid levels were calculated.

Results: Seventeen placebo- and five olanzapine-controlled studies (3 weeks-3 years) of adult patients (≥18 years) were included. Mean changes (LOCF) in lipids were similar between aripiprazole and placebo for all lipid parameters; aripiprazole showed significant improvements versus olanzapine (p≤0.01). The incidence (OC) of switching to abnormal lipid levels from baseline normal was similar between placebo and aripiprazole, and significantly lower with aripiprazole than olanzapine for most measures.

Conclusion: Despite limitations inherent to pooled analyses, these findings lend further support to the differential profile of atypicals, with aripiprazole showing effects on lipids comparable with placebo.