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META-ANALYSIS OF THE EFFICACY OF ASENAPINE FOR ACUTE SCHIZOPHRENIA: COMPARISONS WITH PLACEBO AND OTHER ATYPICAL ANTIPSYCHOTICS A. Szegedi¹, P. Verweij², W. van Duijnhoven², M. Mackle¹, P. Cazorla¹, C. Karson¹, H. Fennema²

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Introduction: Asenapine is an FDA-approved atypical antipsychotic (AAP) indicated in adults for treatment of schizophrenia.

Objective: Present meta-analyses of asenapine vs placebo and other antipsychotics in acute schizophrenia.

Aim: Further demonstrate the efficacy of asenapine in acute schizophrenia.

Methods: PANSS total score changes from baseline to week 6 were assessed using last observation carried forward (LOCF) and mixed model for repeated measures (MMRM). Comparisons of asenapine and antipsychotics vs placebo were obtained from 4 placebocontrolled asenapine studies. Head-to-head comparisons among AAPs assessed in the same trials (including those for which no direct comparisons are available) were conducted with network meta-analyses using a published database (Leucht et al, Am J Psychiatry 2009;166:152-166) of 74 studies updated with data from 5 AAP-controlled asenapine trials. Results: PANSS change from baseline with asenapine exceeded that of placebo (LOCF: 3.7 [95% CI, 1.5-5.9], P=0.001; MMRM: 4.1 [95% CI, 1.6-6.5], P=0.001), a treatment effect comparable to other antipsychotics (LOCF: 4.1 [95% CI, 1.7-6.5], P=0.001; MMRM: 4.6 [95% CI, 1.9-7.3], P=0.001). Head-to-head network meta-analysis reported comparable efficacy with asenapine and other AAPs: PANSS differences ranged from 3.9 points better than ziprasidone (95% CI, 0.3-7.4) to 2.9 points worse than olanzapine (95% CI, -5.-0.1). Discussion: These meta-analyses demonstrate superiority of asenapine over placebo in acute schizophrenia, with treatment effects of asenapine at least comparable to antipsychotics used in the same studies. Further, the network meta-analysis suggests the efficacy of asenapine for acute schizophrenia is comparable to that of established AAPs.