
EFFECT OF 12 MONTHS OF TREATMENT ON WEIGHT IN SUBJECTS WITH SCHIZOPHRENIA: A COMPARISON OF LURASIDONE, RISPERIDONE, AND QUETIAPINE XR

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Introduction: The prevalence of obesity and associated cardiometabolic comorbidity is significantly higher among patients diagnosed with schizophrenia compared to the general population (Mitchell et al. Schizophr Bull 2013;39:306-18)

Objectives: To evaluate the effect of 12 months of treatment with lurasidone, risperidone, or quetiapine XR (QXR) on weight and body mass index (BMI) in subjects with schizophrenia.

Methods: A post-hoc, observed case (OC) analysis was performed on pooled data from 6 clinical studies that evaluated the safety of 12 months of treatment with lurasidone (40-120 mg/day; n=471), risperidone (n=89), and QXR (n=33).

Results: The mean weight at baseline in the lurasidone, risperidone and QXR groups was 72.8, 80.8, and 72.4 kg; with 18.5%, 32.6%, and 15.2%, respectively, meeting standard BMI criteria for obesity. The mean change in weight (kg) in the lurasidone, risperidone and QXR groups, respectively, was -0.5, +1.7, and +1.5 at 3 months; -0.4, +2.2, and +1.5 at 6 months; and -0.4, +2.6, and +1.2 at 12 months. A clinically significant increase in weight ($\geq 7\%$) occurred in the lurasidone, risperidone and QXR groups in 15.7%, 25.0%, and 15.2% of subjects, respectively, at 12 months; and a decrease of $\geq 7\%$ in weight occurred in 18.6%, 6.8%, and 9.1% of subjects, respectively at 12 months. Similar changes in BMI were observed at 12 months.

Conclusions: The results of this pooled analysis of subjects with schizophrenia who completed 12 months of treatment suggest that lurasidone is associated with a low potential for clinically significant weight gain.