

PW01-36 - THE LONG-TERM SAFETY, TOLERABILITY AND EFFECTIVENESS OF ADJUNCTIVE ARIPIPRAZOLE TO LITHIUM/VALPROATE IN BIPOLAR I PATIENTS PARTIALLY NON-RESPONSIVE TO MOOD STABILISERS

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Objective: To evaluate the long-term tolerability and effectiveness of aripiprazole adjunctive to lithium or valproate in bipolar mania.

Methods: Completers of a 6-week double-blind comparison of adjunctive aripiprazole versus placebo in bipolar mania partially responsive to monotherapy were followed up over 46-weeks on open-label aripiprazole plus lithium (ARI+LI) or valproate (ARI+VAL).

Results: 283 (ARI+LI n=108; ARI+VAL n=175) patients entered and 146 (ARI+LI n=55; ARI+VAL n=91) completed the 46-week extension. Safety results for both combinations were consistent with the known tolerability profile of aripiprazole, lithium and valproate. No clinically significant changes in lipids or glucose were observed with either ARI+LI or ARI+VAL. Mean (SE) weight change from double-blind endpoint to Week 46 (LOCF) was 2.3 (0.6) kg with ARI+LI and 2.0 (0.4) kg with ARI+VAL. Temporal analysis of the time of first onset of adverse events showed that akathisia and insomnia tended to occur early in treatment, with few new cases in patients previously treated with aripiprazole during the 6-week study.

Significant improvements from baseline in YMRS total score and MADRS total score were sustained over the 52 weeks with both ARI+LI and ARI+VAL treatment.

Mean reduction from baseline at Week 52 LOCF[95%CI], p value vs baseline	ARI+LI	ARI+VAL
YMRS total score	-16.5 [-18.1; -14.8], p<0.001	-17.6 [-18.9; -16.3] p<0.001
MADRS total score	-1.7 [-3.3; -0.1] p<0.05	-2.7 [-4.0; -1.4] p<0.001

[Table

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Conclusions: Long-term aripiprazole adjunctive to lithium/valproate in bipolar mania was safe and well-tolerated. Improvements in manic and depressive symptoms observed during the first 6 weeks of treatment were maintained.