P03-141

SWITCHING FROM ANTIPSYCHOTIC TO QUETIAPINE XR TREATMENT IN PATIENTS WITH SCHIZOPHRENIA AND HIGH OR LOW DEPRESSION SYMPTOMS

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Purpose: Assess the efficacy of once-daily extended release quetiapine fumarate (quetiapine XR) in patients with schizophrenia and depressive symptoms.

Methods: 12-week, multi-centre, open-label study in adult patients with schizophrenia (D1444C00147). Patients were cross titrated to quetiapine XR over three days (Day 1: 300 mg; Day 2: 600 mg; Days 3-84: 400-800 mg/day [flexible dosing]). Two patient subsets: high depression symptoms (PANSS depression cluster score $\geq$ 12) and low depression symptoms (PANSS depression cluster score < 12) at baseline. Change from baseline of PANSS total score and PANSS depression cluster score were analysed by subgroup.

Results: Mean (SD) change at Day 84 (LOCF) in PANSS depression cluster score was -4.8 (3.3) for patients with high depression (n=109) and -1.1 (2.7) for patients with low depression (n=362). Mean (SD) change from baseline at Day 84 (LOCF) in PANSS total score was -24.3 (18.5) for patients with high depression and -10.5 (18.0) for patients with low depression. At Day 84: in patients switched to quetiapine XR owing to "lack of efficacy", mean change (SD) from baseline in PANSS depression cluster score was -5.2 (3.2) and -1.3 (2.8) for patients with high and low depression, respectively; in patients switched due to "insufficient tolerability", mean change (SD) in PANSS depression cluster score was -4.1 (3.5) and -0.6 (2.5) for patients with high and low, respectively.

Conclusions: Quetiapine XR showed promising results in patients with schizophrenia and depressive symptoms switched from other antipsychotics due to suboptimal efficacy or tolerability. Further randomised, clinical trials are warranted.