AstraZeneca

STUDY REPORT SUMMARY

ASTRAZENECA PHARMACEUTICALS

FINISHED PRODUCT: Quetiapine
ACTIVE INGREDIENT:

Study No: CARE II - D1443L00048
CARE II - Evaluation of treatment outcomes in schizophrenic patients taking part in the integrated care program - a single-country, multi-centre phase IV study

Developmental phase: 4
Study Completion Date: 25.11.2008
Date of Report: 13.10.2009

OBJECTIVES:

Primary objectives

The primary study objective was to assess the effect of quetiapine XR with or without concomitant participation in the ICP on the subjective well-being in patients treated for symptomatic schizophrenia, schizoaffective disorder, schizophreniform disorder, delusional disorder or psychotic disorder not otherwise specified, measured by the patients' self-report instrument SWN-K total score with a result of ≥ 80 defined as the response limit for an adequate subjective well-being over a study treatment period of 18 months.

Secondary objectives

Secondary study objectives were to determine the influence of quetiapine XR with or without participation in ICP on the following parameters:

1. Subjective well-being using the SWN-K total score
2. Symptomatic outcome using CGI-S and PANSS-8 scales
3. Functional outcome using GAF, PSP, EQ-5D, and Vocational Occupational Index scores
4. Quality of life levels using the Q-LES-Q-18 questionnaire and the RSM scale
5. Patient engagement to therapy using the SES scale
6. Compliance/medication adherence using the MARS scale
7. Level of the patients' (subjective) satisfaction using the CSQ-8 scale
8. Health economy improvements in terms of a reduction in treatment costs and loss of productivity by determination of the total number of days with hospitalization,

of days the patient was not able to work or go to school or complete routine daily activities, and of the need for any additional antipsychotic medication

9. Safety and tolerability by evaluation of vital signs including weight/waist circumference, laboratory tests, concomitant medication, and the incidence of adverse events

METHODS:

The protocol specified that data from clinical assessments and combined for all participating centres should be summarized with respect to demographic and baseline characteristics as well as efficacy and safety observations and measurements, and were to be presented in summary tables and individual patient listings per treatment group. For continuous variables, standard quantitative statistics were planned, displaying non-missing observations, mean, standard deviation (SD), minimum, median, maximum, lower and upper quartiles. Categorical variables should be summarized by means of frequency tables, showing non-missing observations and the number and percentages of patients falling into a category. Percentages had to be calculated within each analysis set on the total number of patients included in the respective set.

For the primary exploratory analysis the plan was to calculate the rate of patients with SWN-K total score ≥ 80 after 18 months considering exploratory 95% CIs for each treatment group as well as for the difference between the groups and also for any secondary outcome variable. Due to the premature discontinuation of the study after inclusion of only 7 patients it was decided in the final statistical analysis plan of 20 May 2009 that the statistical analyses and evaluations described in the study protocol would not be performed and that merely a synopsis-format CSR would be prepared. No summary tables were provided and no examination of criteria for evaluability (i.e., with respect to the analysis sets as defined in the protocol) was done. Only individual patient data listings primarily for safety data, of all documented patients are displayed regarding patient disposition, reason for premature termination, demographic data, adverse events, laboratory results, vital signs (with body weight and waist circumference), physical examination, and changes in concomitant medication. In case of dropouts the last available post-baseline observation was carried forward (LOCF).

RESULTS:

Summary of efficacy results

The entire study was terminated prematurely by the sponsor on 30 September 2008, due to a very poor and slow recruitment resulting in only 7 patients (of 200 planned) enrolled in 2 centres (of 30 planned) as described before. Therefore, a relevant amount of efficacy data sufficient for reasonable statistical evaluations, calculations, and analyses could not be collected under consideration of only 7 study patients enrolled who, in addition, did not complete the study treatment period in any case until stop of the project.

Summary of safety results

Until premature stop of the study a total of 8 (4 vs. 4) adverse events (AEs) were observed in 3 (2 vs. 1) patients. The events were specified as nausea, bad dreams and dry mouth in one patient with ICP, and as tiredness in another ICP patient. The events were

all of mild intensity and were classified as causally related to the administration of quetiapine XR. For the patient without ICP suicidal thoughts, pain in the neck, weight gain, and tiredness were documented, again all of mild intensity. Here, relationship to study drug was assumed only for tiredness.
Serious adverse events did not occur in any case and study discontinuation due to AE applied merely for bad dreams with nausea in one patient with ICP

Clinically noticeable and/or relevant findings regarding baseline laboratory values, vital signs, physical examinations, and concomitant medications could not be derived from the study data collected until general study termination.