

A SYSTEMATIC REVIEW OF META-ANALYSES OF THE EFFICACY OF ORAL ANTIPSYCHOTIC LURASIDONE FOR THE TREATMENT OF ADULT PATIENTS WITH SCHIZOPHRENIA

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Background

Schizophrenia is a chronic, severe and disabling mental disorder affecting more than 23 million people worldwide. The cause is multifactorial, genetics and environmental factors are important in disease development. Patients suffer from hallucinations, delusions, disorganized thinking and behaviour; treatment adherence is important and often difficult to obtain. Lurasidone is one of the newer approved second generation antipsychotics orally administered for schizophrenia treatment. Lurasidone has been investigated for efficacy in six main studies, however meta-analyses are useful for clinicians and researchers to review data regarding different interventions. Meta-analyses can overcome many of the limitations of individual studies and help resolve the results of inconsistent studies.

Purpose

To perform a systematic review of meta-analyses of the efficacy of Lurasidone for the treatment of schizophrenia in adult patients.

Material and methods

A systematic literature search was conducted (13/10/2018) using PUBMED, Embase, Metacrawler and Cochrane Library databases through the following search strategy: (lurasidone AND schizophrenia AND randomised controlled trial AND meta-analysis). When possible MeSH Terms/ Emtree were used. Two authors independently conducted the literature search in accordance to Preferred Reporting Items for Systematic Reviews and Meta-analysis statement. Results were screened by title and abstract and then full-texts were analysed. Inclusion criteria were: full-text meta-analysis of randomised controlled trial assessing the efficacy (PANSS/BPRS as outcome measure) of lurasidone versus placebo/other antipsychotic for the treatment of adult patients with schizophrenia despite the language, the Country and the year of publication.

Results

A total of 13 meta-analyses were found from Embase (3), PUBMED (2), Metacrawler (8) and Cochrane Library (0). Only one meta-analysis fitted the inclusion criteria: 1 was excluded as duplicate, 2 were abstracts, 9 were off topic. The included meta-analysis pooled data from 5 similarly designed randomised controlled trials assessing short-term efficacy of lurasidone: 2 phase II studies conducted between 2001 and 2004; 3 phase III studies conducted between 2007 and 2010.

Conclusion

According to results, there is a significantly lack of pooled data about the efficacy of lurasidone for schizophrenia treatment in adults. As clinicians' prescribing choice should be based on solid and accurate data an updated meta-analysis is needed to assess drug efficacy avoiding limitations found for single studies.

