

NEW ANTIPSYCHOTICS, ANTISEIZURE AND
ANTIDEPRESSANT MEDICATIONS
2015-PRESENT

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OBJECTIVES

- Review new medications approved in past 30 months.
- Identify important side-effects of new medications.
- Recognize appropriate use of medications including dosaging, administration, and indications.

WHY?

- New medications are constantly being approved or having new indications are approved by the FDA.
- Need for improved antipsychotics, as current medications have room for improvement., either with their indication, mechanism of action, or side effect and drug interaction profile.

NEW MEDICATIONS AND INDICATIONS: 2015¹

- Latuda (lurasidone)
- Aristada (Aripiprazole Lauroxil) Extended-Release Injectable
- Rexulti (Brexpiprazole)
- Vraylar (Cariprazine)

NEW MEDICATIONS AND INDICATIONS: 2016²

- Briviact (Brivaracetam)
- Carnexiv (Carbamazepine)
- Nuplazid (Pimavanserin)

NEW MEDICATIONS AND INDICATIONS: 2017³

- As of March 10th, 2017 there have been no new FDA approvals for either new medications nor new indications for anticonvulsants, antipsychotics, and/or antidepressants.
- One medication, Retigabine (Potiga), will no longer be available due to lack of usage. SE: abnormalities of the retina. Adjunctive treatment of partial onset seizures.

2015 FDA APPROVALS

REXULTI (BREXIPRAZOLE)^{4,5}

- Approved by the FDA in July 2015
- Approved for treatment of schizophrenia and adjunct treatment of Depression
- Atypical antipsychotic
- Mechanism of Action is currently unknown; D2 partial agonist
- Why developed?
 - Current medications for treating depression and schizophrenia vary in terms of efficacy and side-effect profile leaving much to be desired in terms of finding a medication that works optimally for patients.

REXULTI (BREXIPRAZOLE)^{4,5}

- Two major trials proved efficacy of Rexulti in treatment of Schizophrenia and as an adjunctive treatment for Major Depressive Disorder (MDD)
 - Dosing for Schizophrenia is recommended to start at 1mg once daily taken orally with or without food and to be titrated up to a max daily dose of 4mg over the course of the first 7-8 days.
 - Dosing for MDD is as an adjunct to 1st-3rd line antidepressants with a recommended starting daily dose of 0.5mg by mouth taken with or without food. Titrate on weekly intervals to recommended daily dosage of 3mg.

REXULTI (BREXIPRAZOLE)^{4,5}

- Not indicated in Pediatric Patients
- Boxed Warning
 - Increased mortality in elderly patients with dementia-related psychosis and a potential risk in the increase of the risk of suicidal thoughts and behaviors in patients 24 years or younger with use of antipsychotic drugs
- Side-Effects:
 - Akathisia
 - Weight Gain
 - Potential Tardive Dyskinesia
 - Possible orthostatic hypotension

VRAYLAR (CARIPRAZINE)^{6,7}

- Approved by the FDA in September 2015
- Approved for the treatment of Schizophrenia and Bipolar Disorder
- Atypical antipsychotic
- Mechanism of Action is currently unknown, although thought to be part of a new class of partial agonist/antagonists and stimulates D3 receptors (cognitive enhancers for neuropsychiatric conditions such as autism, schizophrenia, parkinsonism and Alzheimer's Disease)
- Why developed?
 - Improved treatment of schizophrenia and bipolar disorder is constantly driving new drug research.

VRAYLAR (CARIPRAZINE)^{6,7}

- Multiple studies were conducted to evaluate efficacy of Vraylar in treating Schizophrenia and manic or mixed episodes associated with Bipolar I Disorder
- Dose-related increase in adverse reactions seen in patients receiving more than 6mg/day
- Recommended dose range for treatment of Schizophrenia is 1.5mg to 6mg once daily. Start at 1.5mg, can increase to 3mg on day 2, etc.
- Recommended dose range for treatment of manic or mixed episodes associated with Bipolar I Disorder is 3mg to 6mg once daily.
- For both disease states, dose adjustments can be made in either 1.5mg or 3mg increments.

VRAYLAR (CARIPRAZINE)^{6,7}

- Drug Interactions:
 - CYP 3A4 Inhibitors (itraconazole, ketoconazole: reduce dose
 - CYP3A4 Inducers: rifampin, carbamazepine; concomitant use not recommended
- Boxed Warning
 - Increased mortality in elderly patients with dementia-related psychosis and a potential risk in the increase of the risk of suicidal thoughts and behaviors in patients 24 years or younger with use of antipsychotic drugs
- Side Effects:
 - Extrapyramidal symptoms
 - Akathisia
 - Dyspepsia
 - Vomiting
 - Restlessness
 - Somnolence
 - Potential Tardive Dyskinesia
 - Possible orthostatic hypotension

LATUDA (LURASIDONE)

- Indicated for treatment of schizophrenia and acute depression of bipolar disorder
- 2nd generation antipsychotic, antagonizes dopamine D2 receptors and serotonin 5-HT_{2A} receptors
- Used in adults for both schizophrenia and bipolar depression Bipolar I as monotherapy and as adjunctive therapy with valproic acid and lithium and in children 13-17 yrs old for schizophrenia

LATUDA

- Boxed warnings:
 - Elderly with dementia
 - Suicidality in young adults
- Side effects:
 - Angioedema
 - CNS
 - GI
 - Monitor for blood sugar elevations, hyperlipidemia

LATUDA

- Drug interactions
- :Strong CYP3A4 inducers: rifampin, carbamazepine
- Strong CYP450 inhibitors: ketoconazole
- Dosing:
- Adults with schizophrenia: 40mg/day with food. May increase to max of 180mg/day
- Adults with Bipolar I depression: start at 20mg/day may increase to 80mg/day with food
- Children with schizophrenia: start at 40mg/day with food. Max is 80mg/day

ARISTADA (ARIPRAZOLE LAUROXIL)⁸

- FDA approved in October 2015
- Approved for treatment of schizophrenia
- Atypical antipsychotic supplied as a solution for intramuscular administration.
 - Administer in either the deltoid muscle (441mg dose only) or the gluteal muscle (441mg, 662, or 882mg doses only)
- Mechanism of Action is currently unknown for Aripiprazole, however Aristada is a prodrug of Aripiprazole and is metabolized into aripiprazole while in the body.
- Why?
 - An extended-release injectable form of aripiprazole allows for higher doses spread out across larger amounts of time to the benefit of the patient.

ARISTADA (ARIPRAZOLE LAUROXIL)⁸

- FDA approval of Aristada stems from a 12-week trial that established efficacy of Aristada and trials with oral formulation of aripiprazole and their respective efficacy data regarding aripiprazole.
- Dosing for schizophrenia is at 441mg, 662mg, or 882mg injected monthly, or 882mg dose injected every 6 weeks.
- Aripiprazole-naïve patients should have tolerability established with oral aripiprazole prior to starting Aristada.

ARISTADA (ARIPIPRAZOLE LAUROXIL)⁸

- Boxed Warning
- Increased mortality in elderly patients with dementia-related psychosis and a potential risk in the increase of the risk of suicidal thoughts and behaviors in patients 24 years or younger with use of antipsychotic drugs
- Side-Effects:
 - Akathisia
 - Potential Tardive Dyskinesia
 - Possible orthostatic hypotension

2016 FDA APPROVALS

BRIVIACT (BRIVARACETAM)^{9,14}

- Approved by the FDA in February 2016
- Approved for the treatment of partial onset seizures related to epilepsy
- Studied use alongside carbamazepine, lacosamide, lamotrigine, keppra, oxcarbazepine, phenobarbital, phenytoin, pregabalin, topiramate, valproic acid, and zonisamide
- Antiepileptic
- Mechanism of Action is currently unknown
- Class-V controlled substance
- Why develop med?
 - For patients not adequately controlled by 1-2 concomitant AED's and available in multiple formulations.

BRIVIACT (BRIVARACETAM)^{9,14}

- FDA approval of Briviact stems from three major trials that evaluated the efficacy of Briviact.
- Available in tablet, oral solution, and IV administration formulations
 - May give tablet formulation with or without food and are to be swallowed with liquid.
 - Injection should be administered intravenously over 2-15 minutes.
 - May further dilute or mix with 0.9% NS, Lactated Ringer's, or D5W injections.
- Recommended starting dose is 50mg twice daily (100mg daily).
- May adjust dosage to as low as 25mg twice daily (50mg daily) or 100mg twice daily (200mg daily).

BRIVIACT (BRIVARACETAM)^{9,14}

- Warning
 - May increase the risk of suicidal behavior and/or suicidal ideation
- Side-Effects:
 - Somnolence/sedation
 - Dizziness
 - Fatigue
 - Nausea/vomiting
 - Euphoria
 - Infusion site pain
 - Feelings of "drunkenness"

NUPLAZID (PIMAVANSERIN)^{10,11,12}

- FDA approved in April 2016 for the indication of hallucinations and delusions associated with Parkinson's disease.
- Atypical antipsychotic
- Mechanism of Action is currently unknown.
- Why developed?
 - Reduces symptoms of hallucinations and delusions without impacting motor functions like other therapy options.

NUPLAZID (PIMAVANSERIN)^{10,11,12}

- Both indications approved by the FDA were supported by a study that showed benefit of Nuplazid in long-term reduction of frequency and/or severity of hallucinations and delusions in patients with Parkinson's Disease psychosis.
- Recommended dosing is 34mg per day. Take two 17mg tablets once day.
 - No dose titration is advised at this time.

NUPLAZID (PIMAVANSERIN)^{10,11,12}

- Boxed warning
 - Increased mortality in elderly patients with dementia-related psychosis.
- Side-Effects:
 - QT interval prolongation
 - Peripheral edema
 - Nausea
 - Confused state
 - Hallucinations

CARNEXIV (CARBAMAZEPINE)¹³

- Approved by the FDA in October 2016
- Approved for the treatment of seizures
- Antiepileptic
- Mechanism of Action is Carnexiv is a sodium channel blocker.
- Why developed?
 - Replacement therapy for patients with partial seizures with complex symptomatology, generalized clonic-tonic seizures, mixed seizure patterns, or other partial or generalized seizures who are currently taking oral carbamazepine formulations during times when oral administration is temporarily not feasible.

CARNEXIV (CARBAMAZEPINE)¹³

- FDA approval of Carnexiv was based on bioavailability studies that compared oral carbamazepine to Carnexiv and discovered comparable dosing.
- Normal dose of Carnexiv is 70% the total daily dose of carbamazepine divided into four equal infusions separated by 6 hours, diluted in 100mL of diluent, infused over 30 minutes, and not used for periods of time longer than seven days.

CARNEXIV (CARBAMAZEPINE)¹³

- **Boxed warning**
 - Toxic Epidermal Necrolysis (TEN) and Stevens-Johnson syndrome (SJS) have been reported following administration of Carnexiv. Following the use of Carnexiv, there is also a risk of aplastic anemia and agranulocytosis.
- **Side-Effects:**
 - Somnolence
 - Dizziness
 - Blurred vision
 - Diplopia
 - Headache
 - Infusion-site pain

2017 FDA APPROVALS


