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Antipsychotics Induced Diabetes in Veteran Schizophrenia Patients


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Background: Recent case reports and retrospective studies have associated use of atypical and typical antipsychotics in schizophrenia patients with type II diabetes. Schizophrenia is a highly prevalent disease among patients in the Department of Veteran Affairs (VA) and tracking the safety of antipsychotic agents in this population is paramount.

Objective: To determine the relative risk of developing diabetes in VA patients with schizophrenia who are prescribed a single antipsychotic (monotherapy)

Results:

In the cohort of 19878 patients, of 5,981 veterans who took Zyprexa, 200, or 3.34 percent, developed diabetes, compared with 170, or 2.43 percent, of 7,009 veterans taking Haldol or another older medication. Of 5901 patients taking Risperdal, 193, or 3.27 percent, developed diabetes; 21, or 2.39 percent, of 877 veterans taking Seroquel developed the diabetes. Hazard ratios were 1.5 for olanzapine(Zyprexa), 1.47 for Risperidone (Risperdal) and 1.54 for Quetiapine (Seroquel). Quetiapine did not reach statistical significance.

Conclusions: Risk of diabetes among veteran patients with schizophrenia appears to be increased with the use of olanzapine, risperidone, and quetiapine and should be taken into consideration in managing patients with this condition.

Reviewer's Comments:

- A substantial body of scientific evidence over the years has shown that patients with schizophrenia and bipolar disorder are at greater risk for many illnesses, including diabetes, irrespective of their treatment.
- This VA study is one more piece of significant data that confirms what we have said that there is no consistent difference in the risk of diabetes among patients treated with different atypical antipsychotics.
- Therefore, because the risk of diabetes is not avoidable by medication choice, we continue to believe the right thing to do for patients is to select the best medication for their core psychiatric conditions, assess all patients with mental illness for risk factors for diabetes, and counsel patients on living a health lifestyle.

Limitation:
- The study was financed in part by Bristol Myers Squibb
- Smaller number of subjects who took Seroquel.
- Other agents were not evaluated
  - Clozapine – due to sample size
  - Ziprisidone – newly marketed
  - Aripiprazole – not available
- The patients were not randomly assigned to different drugs
- Lack of information of patients’ risk factors for diabetes e.g. patients’ family
ing history of diabetes, weight, BMI etc.

**Approved Sales Representative Verbatim regarding the Cunningham VA Study:**

“The much anticipated Veterans Affairs (VA) study “Antipsychotic-induced Diabetes in Veteran Schizophrenic Patients” was presented in August at an epidemiology meeting in Philadelphia. Articles on the study’s findings have appeared in the Wall Street Journal and the New York Times, and a manuscript is expected to be submitted to a top-tier, peer-reviewed journal next month.

“This large retrospective study of patients with schizophrenia found that there was an increased risk of developing diabetes associated with atypical antipsychotics as compared to a group of typical antipsychotics. The hazard ratios were almost identical across the three agents – 1.50 for Zyprexa, 1.47 for Risperdal and 1.54 for Seroquel. Because of the small sample size for Seroquel, the comparison to typical antipsychotic agents was not statistically significant.

“These results confirm our view that there are no consistent differences in the risk of diabetes among patients treated with different atypical antipsychotics. We believe it is in the best interest of patients to choose the most effective medication to treat their core psychiatric illness, assessing all patients for risk factors for diabetes independent of drug treatment.

“Doctor, does this information help you make treatment decisions involving Zyprexa?”