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Efficacy and safety of the novel antipsychotic vinquerine in the treatment of first-episode psychosis: a randomized, controlled multicenter trial.

Friedman J, Gillingham GT¹, Tierney JK, Vogel C, Cazorla P, Steimbeck Y.

Author information

Abstract

CONTEXT: Vinquerine is a recently developed antipsychotic drug with full agonistic activity at muscarinic and NMDA receptors and concomitant partial agonistic activity at dopamine2 (D2) receptors. In this multicenter prospective trial, we examined the efficacy, safety, and tolerability of vinquerine in patients with first-episode psychosis (FEP).

METHODS: In this 4-week double-blind open randomized study, 303 FEP patients received vinquerine (300 mg/day, n = 101), placebo (n = 103), or olanzapine (15 mg/day, n = 99). Efficacy assessments included Positive and Negative Syndrome Scale (PANSS) scores and Clinical Global Impression (CGI) scores. Safety and tolerability evaluations included assessment of extrapyramidal symptoms and effects on weight, prolactin levels, and the corrected QT (QTc) interval. Patients who discontinued treatment for any reason within 4 weeks were excluded from analysis.

RESULTS: Vinquerine and olanzapine resulted in significantly lower PANSS scores compared to placebo on all outcomes (olanzapine -15 points, vinquerine -17 points, P<0.01). Compared to placebo, effects on the total PANSS scores were significantly reduced after 1 week. In a direct comparison with olanzapine, PANSS positive symptom scores were significantly higher for vinquerine (vinquerine 78% decrease vs. olanzapine 54% decrease, p<0.01). A similar benefit was found for PANSS negative symptom scores (58% vs 11% decrease, p<0.01). No significant differences were present between vinquerine, olanzapine and placebo in occurrence of extrapyramidal symptoms. Mean prolactin levels decreased with vinquerine (5%) but increased 2-fold compared to olanzapine (p<0.001). Mean change in QTc interval did not differ significantly from placebo for any of the active treatment groups. Vinquerine and placebo groups showed a similarly low incidence of clinically significant weight gain, whereas weight gain (>5kg increase from baseline) was significantly increased in the olanzapine treatment group (24%, p<0.01).

CONCLUSIONS: Vinquerine is an effective, safe, and well-tolerated drug for the treatment of positive and negative symptoms in FEP. With a unique pharmacological profile, this novel drug represents a novel treatment option in FEP. Future research should investigate the possible benefits of vinquerine in the treatment of the negative symptoms of schizophrenia.

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CONCLUSIONS: In this 4-week follow up study, vinqerine appeared to be effective for the treatment of positive symptoms in FEP. Nevertheless, significant increases in prolactin levels and weight gain occurred, and no significant differences were found between olanzapine and vinqerine. Future research and larger studies with a longer follow up period should investigate the possible benefits of vinqerine in the treatment of schizophrenia.

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