



# Efficacy Consistent Between Immediate- and Extended-Release Formulations of Second-Generation Antidepressants: Presented at EPA

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MUNICH, Germany -- March 3, 2014 -- Extended- and immediate-release formulations of several second-generation antidepressants currently prescribed in the European Union show similar efficacy, according to a study presented here at the European Psychiatric Association (EPA) 22nd European Congress of Psychiatry.

However, data from 111 trials suggest that differences in adherence to and adverse events from these formulations may vary with the individual and actually be responsible for variations that arise in patient outcome. Similar efficacy between groups of patients does not necessarily translate to the same efficacy with each agent among individual patients.

Barbara Nussbaumer, MSc, Danube University Krems, Krems, Austria, presented the study on March 2.

The investigators included 2 head-to-head trials and 68 placebo- and active-controlled trials in the network meta-analyses that showed no statistically significant differences in efficacy between immediate- and extended-release formulations of frequently prescribed agents, including bupropion, paroxetine, trazodone, and venlafaxine.

In one of the head-to-head trials, a statistically significant difference was seen with fluoxetine that favoured increased adherence when given weekly as opposed to daily (85.5% vs 79.4%;  $P < .01$ ). The other study compared paroxetine immediate release versus paroxetine extended release and showed similar adherence rates for both treatment groups over the 12-week study period (93.2% vs 96.3%).

"We couldn't compare fluoxetine with fluvoxamine but focused on comparisons within single drugs that have immediate-release and extended-release formulations because mechanisms of action and pharmacokinetics vary across drugs, so meaningful comparisons are likely most valid only within single antidepressants with immediate-release and extended-release formulations," Nussbaumer explained.

She cautioned that the results from each of the head-to-head studies came from just 1

trial each and postulated that “maybe there was no difference in adherence in the paroxetine study because both paroxetine formulations had to be taken daily.”

Some differences in formulations regarding adverse events were noted. The comparison of fluoxetine daily versus fluoxetine weekly showed similar rates for most adverse events but demonstrated that “nervousness and thinking abnormal” occurred significantly more often with the weekly than daily formulation.

No statistically significant differences were seen in rates of adverse events in studies comparing both venlafaxine formulations or in 2 studies comparing both paroxetine formulations. However, a third study uncovered elevated rates of nausea with paroxetine immediate release over extended release.

“The evidence is limited and overall does not support clear differences between the 2 formulations at the group level,” Nussbaumer concluded, cautioning that “this does not mean that efficacy, harms, and adherence do not differ for a particular individual.”

*[Presentation title: Immediate vs. Extended Release Second-Generation Antidepressants in the Treatment of Major Depressive Disorder -- A Systematic Review]*

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