Background
Bipolar disorder is a chronic and recurrent disorder characterized by fluctuating manic, hypomanic, and depressive symptoms and has a significantly reduced quality of life. 

Efficacy (NNT) and Tolerability (NNH) of Cariprazine in Bipolar Disorder

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In both the bipolar depression and bipolar mania populations, NNTs were generally <10, suggesting the therapeutic effects are clinically relevant.

NNTs for discontinuations due to adverse events were >20 in both populations, suggesting that cariprazine was generally well tolerated.

Cariprazine treatment appears to have a favorable benefit-risk profile in patients with bipolar depression and in patients with bipolar mania.

METHODS

In the bipolar depression studies, response rates were significantly higher for the cariprazine 1.5 mg/d and 3.0 mg/d groups than for placebo (both P<0.01; Figure 1A). In the bipolar mania studies, response and remission rates were also significantly higher in the cariprazine 1-3 mg/d group compared with placebo (Figure 1B, P<0.01; respectively; Figure 1B).

Figure 1. Response and Remission Rates for Cariprazine in Bipolar Depression and Bipolar Mania

To describe the efficacy and tolerability of cariprazine in patients with bipolar I disorder, but few treatments are also approved for the depressive symptoms of the disorder. Bipolar disorder is a disabling mood disorder characterized by fluctuating manic, hypomanic, and depressive symptoms and has a significantly reduced quality of life. 

In the bipolar depression studies, discontinuation rates were higher for cariprazine 1.5 mg/d and 3.0 mg/d versus placebo (P=0.01 and P=0.02, respectively; Figure 1E).

Figure 2. ARIs and NNHs for Response and Remission for Cariprazine in Bipolar Depression and Bipolar Mania

Table 1. Adverse Events of Interest in Bipolar Depression and Bipolar Mania Studies

CONCLUSIONS

- In both the bipolar depression and bipolar mania populations, NNTs were generally <10, suggesting the therapeutic effects are clinically relevant.
- NNTs for discontinuations due to adverse events were >20 in both populations, suggesting that cariprazine was generally well tolerated.
- Cariprazine treatment appears to have a favorable benefit-risk profile in patients with bipolar depression and in patients with bipolar mania.