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Requires Data Access? Yes

Are external grants or funds being used to support this research?: No external grants or funds are being used to support this research.



How did you learn about the YODA Project?: Colleague

Conflict of Interest

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Certification

Certification: All information is complete; I (PI) am responsible for the research; data will not be used to support litigious/commercial aims.

Data Use Agreement Training: As the Principal Investigator of this study, I certify that I have completed the YODA Project Data Use Agreement Training

- 1. NCT00488319 R076477PSZ3002 A 2-Year, Open-Label, Single-Arm Safety Study of Flexibly Dosed Paliperidone Extended Release (1.5-12 mg/day) in the Treatment of Adolescents (12 to 17 Years of Age) With Schizophrenia
- 2. NCT01009047 R076477PSZ3003 A Randomized, Multicenter, Double-Blind, Active-Controlled, Flexible-Dose, Parallel-Group Study of the Efficacy and Safety of Prolonged Release Paliperidone for the Treatment of Symptoms of Schizophrenia in Adolescent Subjects, 12 to 17 Years of Age
- 3. NCT00645099 R076477SCH3020 A Prospective Randomized Open-label 6-Month Head-To-Head Trial to Compare Metabolic Effects of Paliperidone ER and Olanzapine in Subjects With Schizophrenia
- 4. NCT00518323 R076477PSZ3001 A Randomized, Multicenter, Double-Blind, Weight-Based, Fixed-Dose, Parallel-Group, Placebo-Controlled Study of the Efficacy and Safety of Extended Release Paliperidone for the Treatment of Schizophrenia in Adolescent Subjects, 12 to 17 Years of Age
- 5. NCT01606228 R076477SCH3033 An Open-Label Prospective Trial to Explore the Tolerability, Safety and Efficacy of Flexibly-Dosed Paliperidone ER among Treatment-Naive and Newly Diagnosed Patients with Schizophrenia
- 6. NCT00334126 R076477SCH3015 A Randomized, Double-blind, Placebo-controlled, Parallel Group Study to Evaluate the Efficacy and Safety of Paliperidone ER Compared to Quetiapine in Subjects With an Acute Exacerbation of Schizophrenia
- 7. NCT00086320 R076477-SCH-301 A Randomized, Double-blind, Placebo-controlled, Parallel-group Study With an Open-label Extension Evaluating Paliperidone Extended Release Tablets in the Prevention of Recurrence in Subjects With Schizophrenia
- 8. NCT00589914 R092670PSY3006 A Randomized, Double-Blind, Parallel-Group, Comparative Study of Flexible Doses of Paliperidone Palmitate and Flexible Doses of Risperidone Long-Acting Intramuscular Injection in Subjects With Schizophrenia
- 9. NCT00604279 R092670PSY3008 A Randomized, Open-Label, Parallel Group Comparative Study of Paliperidone Palmitate (50, 100, 150 mg eq) and Risperidone LAI (25, 37.5, or 50 mg) in Subjects with Schizophrenia
- 10. NCT00590577 R092670PSY3007 A Randomized, Double-Blind, Placebo-Controlled, Parallel-Group, Dose Response Study to Evaluate the Efficacy and Safety of 3 Fixed Doses (25 mg eq., 100 mg eq., and 150 mg eq.) of Paliperidone Palmitate in Subjects With Schizophrenia
- 11. NCT00111189 R092670PSY3001 A Randomized Double-blind Placebo-controlled Parallel Group Study Evaluating Paliperidone Palmitate in the Prevention of Recurrence in Patients With Schizophrenia. Placebo Consists of 20% Intralipid (200 mg/mL) Injectable Emulsion
- 12. NCT00210717 R092670PSY3002 A Randomized, Double-Blind, Parallel Group, Comparative

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- <u>Study of Flexibly Dosed Paliperidone Palmitate (25, 50, 75, or 100 mg eq.) Administered Every 4 Weeks and Flexibly Dosed RISPERDAL CONSTA (25, 37.5, or 50 mg) Administered Every 2 Weeks in Subjects With Schizophrenia</u>
- 13. NCT00119756 R092670PSY3005 A Randomized, Crossover Study to Evaluate the Overall Safety and Tolerability of Paliperidone Palmitate Injected in the Deltoid or Gluteus Muscle in Patients With Schizophrenia
- 14. NCT00210548 R092670PSY3003 A Randomized, Double-Blind, Placebo-Controlled, Parallel-Group, Dose-Response Study to Evaluate the Efficacy and Safety of 3 Fixed Doses (50 mg eq., 100 mg eq., and 150 mg eq.) of Paliperidone Palmitate in Subjects With Schizophrenia
- 15. NCT00101634 R092670PSY3004 A Randomized, Double-blind, Placebo-controlled, Parallel-group, Dose-response Study to Evaluate the Efficacy and Safety of 3 Fixed Doses (25 mg eq. 50 mg eq. and 100 mg eq) of Paliperidone Palmitate in Patients With Schizophrenia
- 16. NCT00391222 RISBMN3001 A Randomized, Double Blind, Placebo and Active Controlled
 Parallel Group Study to Evaluate the Efficacy and Safety of Risperidone Long-acting Injectable
 (LAI) for the Prevention of Mood Episodes in the Treatment of Subjects With Bipolar I Disorder
- 17. NCT00034749 RIS-USA-231 The Efficacy and Safety of Risperidone in Adolescents With Schizophrenia: a Comparison of Two Dose Ranges of Risperidone
- 18. NCT00076115 RIS-BIM-301 Research on the Effectiveness of Risperidone in Bipolar Disorder in Adolescents and Children (REACH): A Double-Blind, Randomized, Placebo-Controlled Study of the Efficacy and Safety of Risperidone for the Treatment of Acute Mania in Bipolar I Disorder
- 19. NCT00132678 RISBIM3003 A Randomized, Double-blind, Placebo-controlled Study to Explore the Efficacy and Safety of Risperidone Long-acting Intramuscular Injectable in the Prevention of Mood Episodes in Bipolar 1 Disorder, With Open-label Extension
- 20. <u>NCT00094926 RIS-BIP-302 A Prospective, Randomized, Double-blind, Placebo-controlled Study of the Effectiveness and Safety of RISPERDAL CONSTA Augmentation in Adult Patients With Frequently-relapsing Bipolar Disorder</u>
- 21. NCT00397033 R076477SCA3001 A Randomized, Double-blind, Placebo-controlled, Parallel-group Study to Evaluate the Efficacy and Safety of Two Dosages of Paliperidone ER in the Treatment of Patients With Schizoaffective Disorder
- 22. NCT00412373 R076477SCA3002 A Randomized, Double-blind, Placebo-controlled, Parallel-Group Study to Evaluate the Efficacy and Safety of Flexible-dose Paliperidone ER in the Treatment of Patients With Schizoaffective Disorder
- 23. NCT00236444 CR002020 (RIS-INT-79) Risperidone in the Prevention of Relapse: a Randomized, Double-blind, Placebo-controlled Trial in Children and Adolescents With Conduct and Other Disruptive Behavior Disorders
- 24. NCT00236470 CR002149 (RIS-INT-84) Risperidone in the Treatment of Children and Adolescents With Conduct and Other Disruptive Behavior Disorders an Open Label Follow-up Trial of CR002020
- 25. NCT00250354 CR006007 (RIS-CAN-19) The Safety And Efficacy Of Risperidone Versus Placebo In Conduct Disorder In Mild, Moderate And Borderline Mentally Retarded Children Aged 5 To 12 Years
- 26. NCT00266552 CR006019 (RIS-USA-93) The Safety And Efficacy Of Risperidone Versus
 Placebo In Conduct Disorder and Other Disruptive Behavior Disorders In Mild, Moderate And
 Borderline Mentally Retarded Children Aged 5 To 12 Years
- 27. NCT00249132 RIS-INT-3 A Canadian multicenter placebo-controlled study of fixed doses of risperidone and haloperidol in the treatment of chronic schizophrenic patients
- 28. NCT00216476 RISSCH3001 CONSTATRE: Risperdal(R) Consta(R) Trial of Relapse Prevention and Effectiveness
- 29. NCT00216580 RIS-PSY-301 An Open-label Trial of Risperidone Long-acting Injectable in the Treatment of Subjects With Recent Onset Psychosis
- 30. NCT00253162 RIS-INT-69 The Efficacy And Safety Of Flexible Dose Ranges Of Risperidone Versus Placebo Or Haloperidol In The Treatment Of Manic Episodes Associated With Bipolar I Disorder
- 31. NCT00378092 CR011992, RISSCH3024 A Prospective Study of the Clinical Outcome Following Treatment Discontinuation After Remission in First-Episode Schizophrenia
- 32. NCT00299715 R076477-BIM-3001 A Randomized, Double-Blind, Placebo-Controlled,

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- Parallel-Group, Dose-Response, Multicenter Study to Evaluate the Efficacy and Safety of Three Fixed Doses of Extended-Release Paliperidone in the Treatment of Subjects With Acute Manic and Mixed Episodes Associated With Bipolar I Disorder
- 33. NCT00309699 R076477-BIM-3002 A Randomized, Double-Blind, Active- and Placebo-Controlled, Parallel-Group, Multicenter Study to Evaluate the Efficacy and Safety of Flexibly-Dosed, Extended-Release Paliperidone Compared With Flexibly-Dosed Quetiapine and Placebo in the Treatment of Acute Manic and Mixed Episodes Associated With Bipolar I Disorder
- 34. NCT00309686 R076477-BIM-3003 A Randomized, Double-Blind, Placebo-Controlled, Parallel-Group, Multicenter Study to Evaluate the Efficacy and Safety of Flexibly-Dosed Extended-Release Paliperidone as Adjunctive Therapy to Mood Stabilizers in the Treatment of Acute Manic and Mixed Episodes Associated With Bipolar I Disorder
- 35. NCT00752427 R076477-SCH-702 24 week extension of NCT00085748: A Randomized, 6-Week Double-Blind, Placebo-Controlled Study With an Optional 24-Week Open-Label Extension to Evaluate the Safety and Tolerability of Flexible Doses of Paliperidone Extended Release in the Treatment of Geriatric Patients With Schizophrenia
- 36. NCT00077714 R076477-SCH-304 A Randomized, Double-blind, Placebo- and Active-controlled, Parallel-group, Dose-response Study to Evaluate the Efficacy and Safety of 2 Fixed Dosages of Paliperidone Extended Release Tablets and Olanzapine, With Open-label Extension, in the Treatment of Patients With Schizophrenia
- 37. NCT00083668 R076477-SCH-305 A Randomized, Double-blind, Placebo- and Active-controlled, Parallel-group, Dose-response Study to Evaluate the Efficacy and Safety of 3 Fixed Dosages of Paliperidone Extended Release (ER) Tablets and Olanzapine, With Open-label Extension, in the Treatment of Patients With Schizophrenia
- 38. NCT00074477 R092670-SCH-201 A Randomized, Double-Blind, Placebo-Controlled Study to Evaluate the Efficacy and Safety of 50 and 100 Mg-eq of Paliperidone Palmitate in Patients With Schizophrenia
- 39. NCT00078039 R076477-SCH-303 Trial Evaluating Three Fixed Dosages of Paliperidone Extended-Release (ER) Tablets and Olanzapine in the Treatment of Patients With Schizophrenia
- 40. NCT00085748 R076477-SCH-302 A Randomized, 6-Week Double-Blind, Placebo-Controlled Study With an Optional 24-Week Open-Label Extension to Evaluate the Safety and Tolerability of Flexible Doses of Paliperidone Extended Release in the Treatment of Geriatric Patients With Schizophrenia
- 41. NCT00249158 RIS-AUS-5/CR006010 Risperidone in the Treatment of Behavioural and Psychological Signs and Symptoms in Dementia (BPSSD): a Multicentre, Double-blind, Placebo-controlled Parallel-group Trial
- 42. <u>- RIS-BEL-14 Risperidone in the treatment of behavioural disturbances in patients with Alzheimer's dementia: a double-blind placebo-controlled trial</u>
- 43. NCT00261508 RIS-CAN-23/CR006106 Efficacy And Safety Of Risperidone In The Treatment Of Children With Autistic Disorder And Other Pervasive Developmental Disorders: A Canadian, Multicenter, Double-Blind, Placebo-Controlled Study
- 44. NCT00249236 RIS-IND-2/CR006064 The Efficacy And Safety Of Flexible Dosage Ranges Of Risperidone Versus Placebo In The Treatment Of Manic Or Mixed Episodes Associated With Bipolar I Disorder
- 45. NCT00249145 RIS-INT-24/CR006046 Risperidone in the Treatment of Behavioral Disturbances in Demented Patients: an International, Multicenter, Placebo-controlled, Double-blind, Parallel-group Trial Using Haloperidol as Internal Reference
- 46. NCT00250367 RIS-INT-46/CR006058 The Safety And Efficacy Of Risperdal (Risperidone)

 Versus Placebo As Add-On Therapy To Mood Stabilizers In The Treatment Of The Manic Phase

 Of Bipolar Disorder
- 47. <u>- RIS-INT-83 Efficacy and safety of a flexible dose of risperidone versus placebo in the treatment of psychosis of Alzheimer's disease. A double-blind, placebo-controlled, parallel-group study.</u>
- 48. NCT00088075 RIS-SCH-302/CR003370 A Randomized, Double-Blind, Placebo-Controlled Clinical Study of the Efficacy and Safety of Risperidone for the Treatment of Schizophrenia in Adolescents
- 49. RIS-USA-1 (RIS-USA-9001) Risperidone versus haloperidol versus placebo in the treatment

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- 50. NCT00253149 RIS-USA-102/CR006040 The Safety And Efficacy Of Risperdal (Risperidone)

 Versus Placebo Versus Haloperidol As Add-On Therapy To Mood Stabilizers In The Treatment

 Of The Manic Phase Of Bipolar Disorder
- 51. NCT00253136 RIS-USA-121/CR006055 Risperidone Depot (Microspheres) vs. Placebo in the Treatment of Subjects With Schizophrenia
- 52. RIS-USA-150 A double-blind, placebo-controlled study of risperidone in children and adolescents with autistic disorder
- 53. NCT00034762 RIS-USA-232/CR002764 Efficacy And Safety Of A Flexible Dose Of Risperidone Versus Placebo In The Treatment Of Psychosis Of Alzheimer's Disease
- 54. NCT00257075 RIS-USA-239/CR006052 The Efficacy And Safety Of Flexible Dosage Ranges
 Of Risperidone Versus Placebo In The Treatment Of Manic Episodes Associated With Bipolar I
 Disorder
- 55. <u>- RIS-USA-240 The efficacy and safety of flexible dose ranges of risperidone vs. Placebo or divalproex sodium in the treatment of manic or mixed episodes associated with bipolar 1 disorder</u>
- 56. NCT00253123 RIS-USA-63/CR006022 A Randomized, Double-Blind, Placebo-Controlled Study of Risperidone for Treatment of Behavioral Disturbances in Subjects With Dementia
- 57. RIS-USA-72 The safety and efficacy of risperidone 8 mg qd and 4 mg qd compared to placebo in the treatment of schizophrenia
- 58. NCT01529515 R092670PSY3012 A Randomized, Multicenter, Double-Blind, Relapse Prevention Study of Paliperidone Palmitate 3 Month Formulation for the Treatment of Subjects With Schizophrenia
- 59. NCT01193153 R092670SCA3004 A Randomized, Double-Blind, Placebo-Controlled, Parellel-Group Study of Paliperidone Palmitate Evaluating Time to Relapse in Subjects With Schizoaffective Disorder
- 60. NCT01662310 R076477-SCH-3041 Paliperidone Extended Release Tablets for the Prevention of Relapse in Subjects With Schizophrenia: A Randomized, Double-Blind, Placebo-Controlled, Parallel-Group Study
- 61. NCT00490971 R076477BIM3004 A Randomized, Double-Blind, Active- and Placebo-controlled, Parallel-group, Multicenter Study to Evaluate the Efficacy and Safety of Extended-Release Paliperidone as Maintenance Treatment After an Acute Manic or Mixed Episode Associated With Bipolar I Disorder
- 62. NCT00524043 R076477SCH4012 A Randomized, Double-Blind, Placebo- and Active-Controlled, Parallel-Group Study to Evaluate the Efficacy and Safety of a Fixed Dosage of 1.5 mg/Day of Paliperidone Extended Release (ER) in the Treatment of Subjects With Schizophrenia
- 63. NCT00105326 R076477-SCH-1010/CR002281 A Double-blind, Placebo-controlled, Randomized Study Evaluating the Effect of Paliperidone ER Compared With Placebo on Sleep Architecture in Subjects With Schizophrenia
- 64. <u>- RIS-USA-70 (EXTENSION OF RIS-USA-63) CR003361, RIS-USA-T216 An open-label, long-term study of risperidone for the treatment of behavioral disturbances in patients with dementia</u>
- 65. NCT00246246 RIS-BIP-301 A Randomized, Open-label Trial of RISPERDAL(R) CONSTA(TM) Versus Oral Antipsychotic Care in Subjects With Bipolar Disorder
- 66. NCT00044681 RIS-INT-93 A Study to Evaluate the Efficacy, Safety and Maintenance Effect of Risperidone Augmentation of SSRI Monotherapy in Young and Older Adult Patients With Unipolar Treatment-Resistant Depression
- 67. NCT00249223 RIS-INT-61 Risperidone Depot (Microspheres) vs. Risperidone Tablets a Non-inferiority, Efficacy Trial in Subjects With Schizophrenia
- 68. NCT01157351 R092670SCH3006 A Fifteen-month, Prospective, Randomized, Active-controlled, Open-label, Flexible Dose Study of Paliperidone Palmitate Compared With Oral Antipsychotic Treatment in Delaying Time to Treatment Failure in Adults With Schizophrenia Who Have Been Incarcerated
- 69. NCT01081769 R092670SCH3005 A 24-month, Prospective, Randomized, Active-Controlled, Open-Label, Rater-Blinded, Multicenter, International Study of the Prevention of Relapse Comparing Long-Acting Injectable Paliperidone Palmitate to Treatment as Usual With Oral Antipsychotic Monotherapy in Adults With Schizophrenia

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- 70. NCT01281527 R092670SCH3010 A 6-month, Open Label, Prospective, Multicenter, International, Exploratory Study of a Transition to Flexibly Dosed Paliperidone Palmitate in Patients With Schizophrenia Previously Unsuccessfully Treated With Oral or Long-acting Injectable Antipsychotics
- 71. NCT01051531 R092670SCH3009 Safety, Tolerability, and Treatment Response of Paliperidone Palmitate in Subjects With Schizophrenia When Switching From Oral Antipsychotics
- 72. NCT01527305 R092670SCH4009 An Open-Label, Prospective, Non-Comparative Study to Evaluate the Efficacy and Safety of Paliperidone Palmitate in Subjects With Acute Schizophrenia
- 73. NCT01299389 PALM-JPN-4 A Randomized, Double-Blind, Placebo-Controlled, Parallel-Group, Fixed-Dose, Multicenter Study of JNS010 (Paliperidone Palmitate) in Patients With Schizophrenia
- 74. NCT01258920 PALM-JPN-5 A Long-Term, Open-Label Study of Flexibly Dosed Paliperidone Palmitate Long-Acting Intramuscular Injection in Japanese Patients With Schizophrenia
- 75. NCT00216671 RISSCH4045 Early Versus Late Initiation of Treatment With Risperdal Consta in Subjects With Schizophrenia After an Acute Episode
- 76. NCT00369239 RISSCH4043 Is Premorbid Functioning a Predictor of Outcome in Patients With Early Onset Psychosis Treated With Risperdal Consta?
- 77. NCT00216632 RISSCH4026 Treatment Success in Patients Requiring Treatment Change From Olanzapine to Risperidone Long Acting Injectable (TRESOR)
- 78. NCT00236379 RIS-USA-275 A Six-month, Double-blind, Randomized, International, Multicenter Trial to Evaluate the Glucoregulatory Effects of Risperidone and Olanzapine in Subjects With Schizophrenia or Schizoaffective Disorder
- 79. NCT00576732 RISAUT4002 Risperidone in the Treatment of Children and Adolescents With Autistic Disorder: A Double-Blind, Placebo-Controlled Study of Efficacy and Safety, Followed by an Open-Label Extension Study of Safety
- 80. NCT01050582 RISNAP4022 Evaluation of Growth, Sexual Maturation, and Prolactin-Related Adverse Events in the Pediatric Population Exposed to Atypical Antipsychotic Drugs
- 81. NCT00086112 RIS-ANX-301 A Double-blind, Randomized, Prospective Study to Evaluate Adjunctive Risperidone Versus Adjunctive Placebo in Generalized Anxiety Disorder Suboptimally Responsive to Standard Psychotropic Therapy
- 82. <u>NCT00216528 RIS-KOR-66 A Prospective, Open-Label Study to Evaluate Symptomatic Remission in Schizophrenia With Long Acting Risperidone Microspheres (Risperdal Consta)</u>
- 83. NCT00269919 RIS-KOR-64 Effect on Efficacy, Safety and Quality of Life by Long-Term Treatment of Long-Acting Risperidone Microspheres in Patients With Schizophrenia
- 84. NCT00992407 RISSCH4178 A Randomized, Open-label, Active-controlled Study to Evaluate Social Functioning of Long Acting Injectable Risperidone and Oral Risperidone in the Treatment of Subjects With Schizophrenia or Schizoaffective Disorder
- 85. NCT00236353 RIS-USA-305 An Open-label Study of the Efficacy and Safety of RISPERDAL Long-acting Microspheres (RISPERDAL CONSTA) Administered Once Monthly in Adults With Schizophrenia or Schizoaffective Disorder
- 86. NCT00495118 RIS-INT-80 Risperidone Depot (Microspheres) in the Treatment of Subjects With Schizophrenia or Schizoaffective Disorder an Open-label Follow-up Trial of RIS-INT-62 and RIS-INT-85
- 87. NCT01855074 RISSCH4186 Evaluation of Efficacy and Safety of Risperidone in Long-acting Microspheres in Patients With Schizophrenia, Schizophreniform or Schizoaffective Disorders Diagnosed According to the DSM-IV Criteria, After Switching Treatment With Any Antipsychotic Therapy With Long-acting Microspheres of Risperidone
- 88. <u>NCT00236457 RIS-INT-62 Randomized, Multi-center, Open Label Trial Comparing</u>
 <u>Risperidone Depot (Microspheres) and Olanzapine Tablets in Patients With Schizophrenia or Schizoaffective Disorder</u>
- 89. NCT00236587 RIS-USA-265 An Open Label, Long Term Trial of Risperidone Long Acting Microspheres in the Treatment of Patients Diagnosed With Schizophrenia
- 90. NCT00297388 RIS-SCH-401 A 52-wk Prospective, Randomized, Double-blind, Multicenter Study of Relapse Following Transition From Oral Antipsychotic Medication to 2 Different Doses (25 or 50 mg Every 2 Wks) of Risperidone Long-acting Microspheres (RISPERDAL CONSTA) in Adults With Schizophrenia or Schizoaffective Disorder

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- 91. NCT00821600 RIS-SCH-1012 Single-Dose, Open-Label Pilot Study to Explore the Pharmacokinetics, Safety and Tolerability of a Gluteal Intramuscular Injection of a 4-Week Long-Acting Injectable Formulation of Risperidone in Patients With Chronic Stable Schizophrenia
- 92. NCT00526877 RISSCH4119 (RISC-TWN-MA10) Evaluation of Efficacy and Safety of Longacting Risperidone Microspheres in Patients With Schizophrenia or Schizoaffective Disorders, Who is Receiving Psychiatric Home-care Treatment, When Switching From Typical Depot or Oral Antipsychotics to Long-acting Risperidone Microspheres
- 93. NCT00061802 RIS-SCP-402 A Randomized, Double Blind Study to Evaluate the Efficacy and Safety of Two Atypical Antipsychotics vs. Placebo in Patients With an Acute Exacerbation of Either Schizophrenia or Schizoaffective Disorder
- 94. NCT01624675 RIS-AUT-JPN-01 A Double-blind, Placebo-controlled Study, Followed by an Open-label Extension Study Evaluating the Efficacy and Safety of Risperidone (R064766) in Children and Adolescents With Irritability Associated With Autistic Disorder
- 95. NCT00034775 RIS-USA-259 Open-Label Trial Exploring A Switching Regimen From Oral Neuroleptics, Other Than Risperidone, To Risperidone Depot Microspheres
- 96. NCT00460512 R076477SCH3017 An Open-label Prospective Trial to Explore the Tolerability, Safety and Efficacy of Flexibly Dosed Paliperidone ER in Subjects With Schizophrenia
- 97. NCT00566631 R076477SCH3018 Tolerability, Safety and Treatment Response of Flexible Doses of Paliperidone ER in Acutely Exacerbated Subjects With Schizophrenia
- 98. NCT01515423 R092670PSY3011 A Randomized, Multicenter, Double-Blind, Non-inferiority Study of Paliperidone Palmitate 3 Month and 1 Month Formulations for the Treatment of Subjects With Schizophrenia
- 99. NCT02713282 R092670SCH3015 A 52-Week, Open-Label, Prospective, Multicenter, International Study of a Transition to the Paliperidone Palmitate 3-Month Formulation In Patients With Schizophrenia Previously Stabilized on the Paliperidone Palmitate 1-Month Formulation
- 100. NCT00095134 RIS-DEP-401 A Double-Blind Study Comparing Adjunctive Risperidone
 Versus Placebo in Major Depressive Disorder That Is not Responding to Standard Therapy

What type of data are you looking for?: Individual Participant-Level Data, which includes Full CSR and all supporting documentation

Research Proposal

Project Title

Temporal trajectories of side-effects associated with antipsychotic treatment? An individual participant data meta-analysis

Narrative Summary:

Antipsychotics are the mainstem for the treatment of schizophrenia and other mental disorder. While use of antipsychotics is essential for favorable outcomes in terms of acute efficacy and relapse prevention, it can cause various unpleasant side effects (1). These side effects are associated with a lower quality of life and poorer adherence in patients (2). It is known that patients acquire tolerance to some side effects in clinical practice whereas others may get more severe over time. However, the temporal trajectories of side effects are yet unclear. Therefore, we will investigate temporal trajectories (e.g., onset, duration) of side effects associated with antipsychotic treatment.

Scientific Abstract:

Background: Antipsychotics are the mainstem for treating schizophrenia and other mental disorders.



While use of antipsychotic treatment is essential for favorable outcomes in terms of acute efficacy and relapse prevention, the use of antipsychotics can cause various unpleasant side effects such as sedation, extrapyramidal symptoms, hyperprolactinemia, metabolic and cardiovascular disturbances, and anticholinergic side effects (1). These side effects are associated with a lower quality of life and poorer adherence in patients (2). It is known that patients acquire tolerance to some side effects in clinical practice whereas other side effects may get more severe over time. However, it is unclear when side effects occur and disappear.

Objective: We aim to systematically assess the occurrence, onset, duration and severity of side effects associated with antipsychotic treatment.

Study Design: This study is an Individual-Patient-Data (IPD) meta-analysis of clinical trials to evaluate the occurrence, onset, duration and severity of side effects associated with antipsychotic treatment. Participants: Participants in clinical trials of antipsychotic drug monotherapy irrespective of diagnosis, age, gender, and ethnicity.

Main Outcome Measures: The occurrence, onset, duration, and severity of side effects associated with antipsychotic treatment

Statistical Analysis: The median time to onset and the duration of side effects will be calculated from synthesized data by IPD meta analysis.

Brief Project Background and Statement of Project Significance:

Antipsychotics are the mainstem for the treatment of schizophrenia and used for the treatment of other psychiatric diseases. While the use of antipsychotic therapy is essential for favorable outcomes in terms of acute efficacy and relapse prevention, the use of antipsychotics can cause various unpleasant side effects such as sedation, extrapyramidal symptoms, hyperprolactinemia, metabolic and cardiovascular disturbances, and anticholinergic side effects (1). The impacts of side effects vary widely, ranging from very unpleasant in daily life (e.g., sedation, akathisia, weight gain, and constipation) to life-threatening (e.g., neuroleptic malignant syndrome, pneumonia, thromboembolism, and sudden cardiac death). Given these side effects are associated with a lower quality of life and poorer adherence in patients (2), proper management of side effects is important for a long-term treatment. However, the timeline of side effects has not been systematically studied. Knowing for example when side effects occur and disappear not only allows clinicians to optimize treatment with antipsychotics, but also helps patients monitor and manage their side effects. Therefore, this study aims to systematically assess the occurrence, onset, duration, and severity of side effects associated with antipsychotic treatment.

Specific Aims of the Project:

The purpose of this project is to systematically assess temporal trajectories (the occurrence, onset, duration, and severity) of side effects associated with antipsychotic treatment and factors that could influence them.

Primary objective:

Evaluate temporal trajectories of antipsychotic-associated side-effects, e.g., time of onset, duration, temporal changes in severity, and time of disappearance.

Secondly objectives:

Evaluate factors (e.g., type of antipsychotic, dosage) that could influence temporal trajectories of antipsychotic-associated side-effects.

Research Methods

Data Source and Inclusion/Exclusion Criteria to be used to define the patient sample for your study:

We will consider prospective trials investigating the antipsychotic treatment in monotherapy without further restrictions, such as in terms of randomization, blinding, or follow-up duration. Any antipsychotic drug (ATC codes of N05., except lithium N05AN01) or placebo will be eligible. All participants in eligible studies will be included, irrespective of underlying diagnosis (e.g., schizophrenia, schizoaffective disorder, bipolar disorder, and children with disruptive behavior



disorder), stage and severity of illness (e.g., acute, chronic), age (e.g., children, adolescent, and adults), gender, ethnicity, and comorbidities.

Primary and Secondary Outcome Measure(s) and how they will be categorized/defined for your study:

We will investigate temporal trajectories of antipsychotic-associated side-effects (e.g., time of onset, duration, changes in their severity, and time of disappearance).

We will consider 1) adverse events, such as extrapyramidal symptoms, akathisia, sedation, weight gain, prolactin elevation, QTc prolongation, and anticholinergic side-effects (e.g., constipation, blurred vision) We will use the Medical Dictionary for Regulatory Activities Terminology (MedDRA)(3) for the classification of adverse events. We will also consider 2) rating scale measures (e.g., Drug Induced Extra Pyramidal Symptoms Scale, Simpson-Angus Extrapyramidal Rating Scale, UKU side effect rating scale, Visual Analog Scale, Barnes Akathisia Rating Scale), and 3) biological measures (e.g., body weight, corrected QT interval on ECG, blood pressure, prolactin, blood glucose)

Main Predictor/Independent Variable and how it will be categorized/defined for your study:

The use of antipsychotics will be the independent variable.

The independent variable allows us to investigate the relationship between antipsychotic use and the onset, duration, and severity of the side effects of antipsychotics.

Other Variables of Interest that will be used in your analysis and how they will be categorized/defined for your study:

We will consider factors with a potential influence on the temporal trajectories of antipsychotic-associated side-effects, such as specific antipsychotics, dosage of antipsychotics, administration route of antipsychotics, age, gender, ethnicity, diagnosis, life-time antipsychotic exposure (when not available, duration of illness will be used as a proxy in participants with schizophrenia), comorbid disorders, family history, smoking, baseline BMI, measures of psychopathology, and concomitant medications, etc.

Statistical Analysis Plan:

First, we will conduct descriptive analysis on time to onset and duration of side effects, and then with statistical models that take temporal trajectories into account, such as the Kaplan-Meier method for binary adverse event data and Mixed-Models-of-Repeated-Measurements (MMRM) for rating-scale outcomes and biological measures. The effect size measures will be the time to onset and the time to resolution for binary adverse events and the change from baseline for rating-scale-outcomes or biological measures.

We consider occurrence and duration of somatic side effects of antipsychotics rather independent of the underlying psychiatric disease (e.g., schizophrenia or bipolar disorder) and therefore, we include a priori studies in different disorders. However, we expect variability in the effects due to differences in participant, intervention, and study characteristics. Therefore, we will explore sources of heterogeneity by subgroup and meta-regression analyses on potentially important effect modifiers such as age, sex, diagnosis (to investigate our assumption above), previous antipsychotic exposure, type, application and dose of antipsychotic, trial duration, RCT (Randomized control trial) and not RCT. ? (see list of ?Other Variables of Interest? above).

Variables which emerge as having a substantial effect on occurrence and duration of side effects will be included in the statistical model by introducing interactions.

We will handle missing outcome and covariate data following Little et al.(4) and impute it, when scientifically sound, by multiple imputations.

Effect size measures and covariates of different studies will be synthesized with meta-analysis. I-squared and Tau-squared will be used to measure heterogeneity.

To estimate publication bias, we will use funnel plot and Egger?s test. In addition to examining the risk of small-trial/publication bias with funnel plots, we will investigate the potential risk of bias due to selection of reported results within the risk of bias assessment and the potential risk of bias due to



selective non-reporting of results with the ROB-MEN(5) tool within the CINeMA assessment. The standardized Grading of Recommendations Assessment, Development, and Evaluation (GRADE) approach will be used to examine the strength of evidence.

Project Timeline:

Start of project: The study will start immediately after the data is available. The actual state of the project: it is planned to finish data extraction and to start data analysis by 11/2022. The manuscript will be made and submitted in six months (6/2023). The publication is planned for the following six months(12/2023).

Dissemination Plan:

The results of this work will be a significant advancement in optimizing antipsychotic treatment for psychiatric disease, which in turn will reduce the burden for patients with schizophrenia and their caregivers, as well as medical costs in the long term. We will make the results available in several publications in scientific journals (e.g., JAMA Psychiatry, Lancet Psychiatry). Moreover, it is expected that the results will be included in local and international treatment guidelines.

Bibliography:

- 1. Huhn M, Nikolakopoulou A, Schneider-Thoma J, Krause M, Samara M, Peter N, et al. Comparative efficacy and tolerability of 32 oral antipsychotics for the acute treatment of adults with multi-episode schizophrenia: a systematic review and network meta-analysis. Lancet. 2019; 394(10202): 939-51.
- 2. Dibonaventura M, Gabriel S, Dupclay L, Gupta S, Kim E. A patient perspective of the impact of medication side effects on adherence: results of a cross-sectional nationwide survey of patients with schizophrenia. BMC Psychiatry. 2012; 12(1): 20.
- 3. International Council for Harmonisation of Technical Requirements for Pharmaceuticals for Human Use (ICH). Medical Dictionary for Regulatory Activities Terminology (MedDRA). www.meddra.org.
- 4. Little RJ, D'Agostino R, Cohen ML, Dickersin K, Emerson SS, Farrar JT, et al. The Prevention and Treatment of Missing Data in Clinical Trials. New England Journal of Medicine. 2012; 367(14): 1355-60.
- 5. Chiocchia V, Nikolakopoulou A, Higgins JPT, Page MJ, Papakonstantinou T, Cipriani A, et al. ROB-MEN: a tool to assess risk of bias due to missing evidence in network meta-analysis. BMC Medicine. 2021; 19(1).