**CATIE Summary**

*Lieberman, JA et al. (2005). Effectiveness of Antipsychotic Drugs in Patients with Chronic Schizophrenia. New England Journal of Medicine, (353), p. 1209 – 1223.*

**Clinical Question:**  What are the best treatments for chronic schizophrenia?

**Clinical Take Homes:**

* Largest, longest, most comprehensive independent trial ever conducted to study existing therapies for schizophrenia
* Perphenazine (FGA) & Olanzapine, Risperidone, Quetiapine, and Ziprasidone (SGA) studied
* Primary Measure of treatment success: Length of time a patient benefitted from & stayed on a med before they/their doctor decided to change it. More simply: “Time to Discontinuation”
* All medications studied were comparably effective
* Olanzapine showed improved efficacy and a longer time to discontinuation compared to other trialed medications, but metabolic side effects yielded poor tolerance by patients
* Perphenazine generally performed as well as the four SGAs studied with no statistically significant increase in side effects, including extrapyramidal symptoms

**CATIE Phase 2**: Two pathways

* Efficacy Pathway: Results – Clozapine had greater symptom control than all other meds, close side effect monitoring essential
* Tolerability Pathway: Results – Ziprasidone, similar results to Phase 1

**Study Population:** Patients diagnosed with chronic schizophrenia; 1460 subjects at 57 US sites.

* 74% male; 60% white, 35% African-American, 12% Hispanic
* Average age: 40.6 years

**Study Endpoints:** Patients followed for 18 months.

**Study Design and Results:** NIMH funded study to look at best treatments for chronic schizophrenia

* Multi-centered, double-blind, parallel-group, randomized clinical trial
* Measure of treatment success: “Time to Discontinuation,” determined by:
  + Overall level of functioning on medicines
  + Patient choice to stop meds for other reasons.
* Patients visited with physicians monthly and took randomly assigned medications for 18 months, or discontinued them due to:
  + Poor symptom control
  + Successful modification of symptoms
  + Tolerability of side effects
  + Decision to stop the medication
  + Decision to withdrawal from the study

**Criticism:**

* 74% of patients enrolled in the study (part of the “intention to treat” analysis) discontinued their assigned treatment in Phase 1, before 18 months. (Median: 6 months)
* Med doses were based on pharma company recs rather than by the FDA
* Nearly 75% of patients switched from 1st medication to a different med during the trial.

**References:**

1. NIMH Site on CATIE: https://www.nimh.nih.gov/funding/clinicalresearch/practical/catie/phase1results.shtml
2. McEvoy, JP et al. (2006). Effectiveness of Clozapine vs. Olanzapine, Quetiapine and Risperidone in Patients with Chronic Schizophrenia Who Did Not Respond to Prior Atypical Antipsychotic Treatment. *American Journal of Psychiatry*, 163: 600-610.