HEALTH RESEARCH ABSTRACT SUBMISSIONS

Name * Marra Burr
Email * MarraBurr@gmail.com
Educational Level * Post-Doc/Fellow
If Selected Other
College * College of Pharmacy
Department * ICVAMC Pharmacy
Title of Research * Evaluation of Dose-Related Metabolic Effects of Quetiapine
Other Authors * Tami Argo, Pharm.D., BCPP; Jason Egge, Pharm.D., BCPS, M.S.; Shella Johnson, Pharm.D.

Introduction & Purpose *
Quetiapine—a second generation antipsychotic (SGA)—at low doses (<300mg/day) is commonly used within the Iowa City Veterans Affairs Medical Center (ICVAMC). Quetiapine metabolic effects may develop independent of dose, but data are inconsistent. ICVAMC recommends patient's metabolic parameters be monitored at baseline and three months, but practitioner vigilance may vary by SGA dose. Our primary objective was to investigate the effect varying doses of quetiapine have on body mass index. Secondary objectives examined other metabolic parameters and monitoring compliance.

Experimental Design *
Electronic medical record review was completed for 508 patients initiated on quetiapine. Metabolic parameters were recorded at baseline and after 90-365 days of treatment. Patients were excluded if initiated on quetiapine outside the ICVAMC (n=129), had less than three months of continuous use (n=262), current daily dose prescribed for less than one month prior to monitoring date (n=5), or monitoring not completed within one year of initiation (n=9). Diagnosis and treatments for co-morbid conditions (e.g. diabetes, hyperlipidemia, and hypertension) were noted.

Results *
We enrolled 103 subjects, 93.2% male, average age 57 ± 12 years. Average follow-up quetiapine dose was 122.3 ± 104.3 mg/day, resulting in a BMI increase of 0.418 (p=0.0579). Weight monitoring occurred on average at 150 ± 47 days post-initiation. Insomnia was listed as an indication for use for 79.6% of patients.

Conclusions *
Patients with metabolic monitoring did not show a statistically significant increase in BMI with the initiation of quetiapine. Of clinical relevance is the infrequency of baseline weight monitoring and the frequency of off-label use for insomnia.