TRENT MEDICINES INFORMATION SERVICE

QIPP Detail Aid

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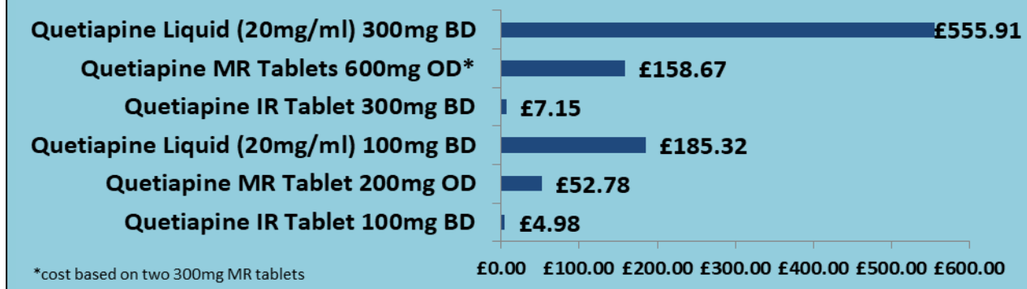
QUETIAPINE: USE PLAIN TABLETS

WHAT IS THE PROBLEM?

- Quetiapine came off patent in 2012, since then generic quetiapine has been available and a licensed liquid formulation has been available since 2016.
- The cost of generic immediate release (IR) quetiapine tablets are significantly less than modified release (MR) tablets (including generic MR tablets) and quetiapine 20mg/1ml liquid (see chart).
- In addition quetiapine liquid needs to be stored in the fridge in its original 150ml bottle and must be used within 28 days of opening.
- In the first quarter of 2019, 23% of scripts for quetiapine in Barnsley CCG were for the MR tablets but these made up 68% of the total cost.
- Prescribing of quetiapine liquid remains low in Barnsley CCG.

WHAT ARE THE COSTS?



*cost based on two 300mg MR tablets

Costs for 28 days treatment from the Drug Tariff October 2019.
Doses given are a guide only and are based on licensed doses.

WHAT IS THE EVIDENCE?

- Quetiapine is licensed for the treatment and prevention of relapse in schizophrenia and treatment and prevention of mania and depression in bipolar disorder. It is available as IR tablets, MR tablets and liquid formulations. The MR tablets are additionally licensed for add-on treatment of major depressive episodes in patients with Major Depressive Disorder (MDD).
- The MR tablets are taken once daily. The IR tablets and liquid are taken twice daily although licensed to be taken once daily for the treatment of depression in bipolar disorder. The licensed titration schedules for MR tablets and IR/liquid are different.
- The BNF states that patients can be switched from IR to MR tablets at the equivalent daily dose; to maintain clinical response, dose titration may be required[1].
- There are minimal differences between the formulations. The maximum plasma concentration and the total amount of drug absorbed for quetiapine MR administered once daily are comparable to those achieved for the same total daily dose of quetiapine IR administered twice daily[2].
- The onset of action for the IR tablets may be more rapid than the MR tablets which may result in a higher incidence of sedation and postural hypotension with the IR formulation. If necessary, this can be mitigated by splitting the total daily dose to give a greater proportion in the evening.
- A few studies have investigated switching between formulations and found no significant difference in safety/tolerability between IR and MR[3].

KEY MESSAGES

- There is a significant price differential between quetiapine IR tablets, MR tablets and liquid formulations. A significant cost saving could be made by switching appropriate patients from MR tablets to IR tablets.
- There are minimal differences between the IR and MR formulations. MR formulations can be switched directly to the equivalent twice daily dose IR formulation e.g. 600mg OD MR can be switched directly to 300mg BD IR.
- If sedation or postural hypotension is an issue, the dose can be split asymmetrically to give a greater proportion of the dose in the evening. Patients should be fully involved in the decision regarding which formulation to use.
- No one should be prescribed a MR formulation as a split dose.
- Patients who are already prescribed MR tablets should be reviewed if appropriate to switch to twice daily IR tablets, particularly if already taking other medications twice daily.
- If once daily MR is deemed necessary the reason should be clearly documented in the patient's notes. Quetiapine MR should be prescribed as Biquelle® XL tablets, the brand of choice in Barnsley.
- Quetiapine liquid should be reserved for select patients who cannot swallow tablets. Where quetiapine liquid is not available, NEWT guidelines state IR tablets can be crushed and added to a soft food (e.g. yogurt)[4]. Crushing tablets is unlicensed use.
- SWYFT recommend the use of IR quetiapine tablets first line, reserving the MR tablets for when fast titration is imperative and in cases where compliance support is needed.

 Approved by the Area Prescribing Committee on 12th February 2020

Date Approved: February 2020 Review Date: February 2022

References:

1. Joint Formulary Committee. British National Formulary (online). London: BMJ Group and Pharmaceutical Press <http://www.medicinescomplete.com> [Accessed on 2019 Nov 1].
2. Summary of Product Characteristics – Seroquel XL prolonged-release (quetiapine). AstraZeneca. Accessed via https://www.medicines.org.uk/emc/product/7603/smpc on 01/11/19 [date of renewal of the text November 2015].
3. Möller HJ et al Evaluation of the feasibility of switching from immediate release quetiapine to extended release quetiapine fumarate in stable outpatients with schizophrenia. Int Clin Psychopharmacol. 2008; 23: 95-105
4. Smyth J, editor. The NEWT Guidelines [Internet]. Wrexham: Betsi Cadwaladr University Local Health Board (Eastern Division) [cited 2019 Nov 01]. Available from: http://www.newtguidelines.com/