Randomized Olanzapine Clozapine Key study on Schizophrenia and Addiction in the Netherlands (ROCKSAN)

Published: 22-12-2008 Last updated: 06-05-2024

Primary research questions: 1. Is there a difference in effectiveness of clozapine treatment compared to olanzapine treatment in the reduction of substance use disorders of patients with schizophrenia and related psychotic disorders? 2. What is the...

Ethical review Approved WMO

Status Pending

Health condition type Other condition **Study type** Interventional

Summary

ID

NL-OMON32733

Source

ToetsingOnline

Brief title ROCKSAN

Condition

- Other condition
- Schizophrenia and other psychotic disorders
- · Lifestyle issues

Synonym

addiction, psychosis, schizophrenia, substance abuse

Health condition

verslaving

Research involving

1 - Randomized Olanzapine Clozapine Key study on Schizophrenia and Addiction in the ... 4-05-2025

Human

Sponsors and support

Primary sponsor: Academisch Medisch Centrum

Source(s) of monetary or material Support: ZonMW

Intervention

Keyword: clozapine, olanzapine, randomized, schizophrenia, substance abuse

Outcome measures

Primary outcome

1. At baseline, week 4, week 8, month 6 or at moment of withdrawal from the study: Self reported substance use - CIDI section B,J,L and Recent Drug Use Urinalysis

2. Cost-effectiveness - Incremental cost-effectiveness ratio (ICER): difference in costs/the difference in effectiveness (clozapine-olanzapine).

Secondary outcome

- 1. Direct and indirect medical costs, and non-medical costs
- 2. Other clinical outcome: Psychopathology: PANSS, YBOCS, OCDUS, QoL, SWN, CGI, GAF, LCS,
- Adverse effects: leucopoenia, agranulocytosis, Time to non- compliance, Time to withdrawal from study, Quality of life, Quality adjusted life years (QALYs)

Study description

Background summary

The lifetime prevalence of substance use disorders (SUD) of patients with

2 - Randomized Olanzapine Clozapine Key study on Schizophrenia and Addiction in the ... 4-05-2025

schizophrenia is about 50%. Substances commonly abused by patients with schizophrenia include nicotine, alcohol, cannabis, cocaine and amphetamines. Co-morbid substance abuse is associated with poor outcome. There are some indications that clozapine has a favourable effect on SUD in schizophrenia. These possible benefits should be weighed against the risk of adverse effects. If this study proves that clozapine is effective in reducing SUD of patients with schizophrenia, clozapine should get a more prominent place in the treatment protocol of patients with SUD and schizophrenia.

Study objective

Primary research questions: 1. Is there a difference in effectiveness of clozapine treatment compared to olanzapine treatment in the reduction of substance use disorders of patients with schizophrenia and related psychotic disorders? 2. What is the Incremental cost-effectiveness ratio (ICER): the difference in costs / difference in effectiveness of clozapine treatment compared to olanzapine treatment?

Secondary research questions: 1. Are there differences in direct and indirect medical costs and non-medical costs between clozapine treatment and olanzapine treatment? 2. Are there differences in effectiveness of clozapine treatment compared to olanzapine treatment in: psychopathology, adverse effects, compliance, drop out rate, psychosocial functioning and quality of life?

Study design

A 6 month multi-centre randomized, double blind study

Intervention

clozapine flexible dose 200-600 mg, olanzapine flexible dose 10 mg-30 mg

Study burden and risks

Burden: Patients will be randomly allocated to receive clozapine or olanzapine. One extra session is needed to inform patients on the study design and procedure. Four extra sessions are needed to assess baseline and outcome data. Risk: There is a risk on adverse effects related to the treatment with clozapine or olanzapine. Careful clinical procedures will be performed to detect adverse effects and respond to them as needed. To keep the blinding it is necessary to perform the same routine blood monitoring in both treatment groups. Some extra blood samples will be taken for future research on proteins, which may function as biological marker for treatment. Benefit: study medication may be associated with favourable effects.

Contacts

Public

Academisch Medisch Centrum

Meibergdreef 5 1105 AZ Amsterdam NL

Scientific

Academisch Medisch Centrum

Meibergdreef 5 1105 AZ Amsterdam NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years) Elderly (65 years and older)

Inclusion criteria

Eligible for the study are in- and outpatients age 18 to 50, meeting DSM-IV criteria for schizophrenia, schizoaffective - or schizophreniform disorder and substance abuse or dependence based on the Structured Clinical Interview for the Diagnostic and Statistical Manual of Mental Disorders (SCID-P).

Patients that are admitted under authority of the court should also be included, since this group embodies a very large percentage of the targetgroup.

Patients should be able to understand the study information and procedures and give informed consent.

Exclusion criteria

- Pregnancy
- Lactating women
- Female subject without adequate contraception
- Known hypersensitivity to clozapine, olanzapine or ingredients used in these tablets
- Concomitant daily use of any antipsychotic other drug than clozapine or olanzapine (crisis intervention medication excepted)
- Use of depot antipsychotics in the three months prior to inclusion
- Narrow-angle glaucoma
- Known neurological or endocrine disease interfering with clozapine or olanzapine treatment
- Myeloproliferative disorder
- Uncontrolled epilepsy
- History of treatment with clozapine in the past 12 months during at least 4 months at therapeutic serum levels
- Paralytic ileus
- Current leukocyte level lower than 3.5 x 10 9/l
- Current neutrophilic granulocyte level lower than 2.0x 10 9/l

Study design

Design

Study phase: 3

Study type: Interventional

Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Double blinded (masking used)

Control: Active

Primary purpose: Treatment

Recruitment

NL

Recruitment status: Pending

Start date (anticipated): 01-10-2008

Enrollment: 140

Type: Anticipated

Medical products/devices used

Product type: Medicine

Brand name: Clozaril

Generic name: Clozapine

Registration: Yes - NL intended use

Product type: Medicine

Brand name: Zyprexa

Generic name: Olanzapine

Registration: Yes - NL intended use

Ethics review

Approved WMO

Date: 22-12-2008

Application type: First submission

Review commission: METC Amsterdam UMC

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register ID

EudraCT EUCTR2008-005019-16-NL

CCMO NL24882.018.08