Carbamazepine Extended-Release Capsules in the Treatment of Bipolar Disorder

LAWRENCE D. GINSBERG, MD
Red Oak Psychiatry Associates, Houston, TX, USA

Bipolar disorder is a destructive psychiatric illness that carries with it a high risk of suicide in affected individuals (1). Including all subtypes, the lifetime prevalence of this disease is between 3.0% and 9.8% (2–4). Although bipolar illness can develop at almost any age, the peak period of onset appears to be during adolescence, specifically between the ages of 15 and 19 years (5). All too often, pharmacologic intervention fails to provide comprehensive control of the illness, and this situation can result in the trial and use of multiple medications. Poor response occurs in approximately 35% of patients, while the significant side effects associated with many of these agents have a serious impact on compliance rates (6).

Carbamazepine (CBZ) has been used extensively as an antiepileptic agent in Europe since the 1960s. During that time span it has also been an alternatively prescribed therapy for the treatment of bipolar disorder. Because of the lack of large, placebo-controlled clinical trials investigating the efficacy of CBZ in the treatment of bipolar disorder in the United States, it had never before been granted approval from the U.S. Food and Drug Administration (FDA) for this indication, even though it was approved by agencies in Canada, Japan, Australia, and several European countries. In December 2004, CBZ extended-release capsules (CBZ-ERC) (Equetro™, Shire, Wayne, PA, USA) were approved by the FDA for the treatment of acute manic and mixed episodes associated with bipolar I disorder. FDA approval for bipolar I disorder represents a momentous occurrence in the life span of this compound, and bestows upon CBZ-ERC a heightened credibility in psychiatry based on efficacy and safety displayed in the CBZ-ERC pivotal clinical trials.

This supplement provides insight into the usage of CBZ-ERC in psychiatric practice. The data for these manuscripts are garnered from chart reviews of a total of 600 patients treated with CBZ-ERC in a single-site private practice setting (Red Oak Psychiatry Associates, Houston, TX) who met DSM-IV criteria for bipolar disorder. Though CBZ-ERC for use in psychiatry has recently become available, the exact same formulation has been available for use in epilepsy for years (under the trade name Carbatrol®); data gathered in this supplement are from patients treated with this agent. The following manuscripts summarize significant areas of interest to the practicing psychiatrist, including long-term tolerability with CBZ-ERC in psychiatry, and the effects of therapeutic polypharmacy with CBZ-ERC and other medications.

In summary, the field of psychiatry has seen rapid progress in the past decade. The availability of numerous new FDA-approved agents for use in bipolar disorder alone underscores this fact. This supplement was produced with the hopes that it may shed light on the utility of CBZ-ERC, and provide insight into the usage of a newly FDA-approved therapeutic agent for bipolar disorder.

Equetro is a trademark and Carbatrol is a registered trademark of Shire LLC.

REFERENCES