抗精神病薬服薬歴が統合失調症治療における抗精神病薬の有効性及び忍容性に与える影響－D2 受容体フルアンタゴニストとパーシャルアゴニストを比較して－

Antagonist and partial agonist at the dopamine D2 receptors in drug-naïve and non-drug-naïve schizophrenia: a randomized, controlled trial

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Few data are available on the efficacy and safety of antipsychotics with different dopamine D2 receptor（D2-R）binding properties in drug-naive and non-naive schizophrenia. Thus, we aimed to assess whether antipsychotic medication history influences efficacy and tolerability in schizophrenia, based on a randomized controlled study of antipsychotics with mechanisms involving either full antagonism or partial agonism of D2-R. Patients with schizophrenia were recruited and given perospirone or aripiprazole in a 12-week, flexible-dose, open-label, randomized controlled study. Data were analyzed after dividing the patients into antipsychotic-naive and antipsychotic-treated group according to antipsychotic medication histories. Efficacy and safety were evaluated using the Positive and Negative Syndrome Scale（PANSS）, the Drug-Induced Extrapyramidal Symptoms Scale（DIEPSS）, and the Barnes Akathisia Rating Scale（BARS） In patients receiving perospirone, the antipsychotic-naive group（n = 22） showed greater symptom improvement than that shown by the antipsychotic-treated group（n = 29）, as assessed by efficacy evaluation scales such as the PANSS total, positive, and excited component score（p = .006, p ＜ .001, p = .003, respectively）. In patients receiving aripiprazole, however, there was no significant difference in efficacy between the antipsychotic-naive（n = 18）and antipsychotic-treated（n = 31） groups. No significant intra-group or inter-group difference was noted with respect to any of the tolerability-related parameters assessed. The present study data support the hypothesis that antipsychotic medication history may influence efficacy in patients who receive a D2-R full-antagonist but not a D2-R partial-agonist.