

QUETIAPINE FOR THE TREATMENT OF COCAINE DEPENDENCE

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Background: Cocaine abuse continues to be epidemic, and yet there are no FDA approved medications for the treatment of cocaine use disorders within the United States.

Methods: This 12-week, prospective, double-blind, randomized, placebo-controlled study examined the effectiveness of quetiapine (Seroquel XRTM) versus matched placebo for the treatment of cocaine dependence in non-psychotic individuals. Sixty Individuals with a diagnosis of cocaine dependence were randomized in this study. Those who were randomized to quetiapine (N=29) were titrated up to a target dose of 400 mg/day of quetiapine, while those in the placebo arm (N=31) were given a matched placebo. All subjects had weekly clinic visits and a cognitive-behavioral therapy group session. Outcome measures included questionnaires of cocaine use, money spent on cocaine, and urine drug screens (UDS).

Results: The drop-out rate was substantial at 68%, however there were no group differences between the two arms of the study. Using a repeat measures ANCOVA, as a whole, the subjects in this study improved by reducing their self-reported use of cocaine ($p=.018$) and self reported money spent on cocaine ($p=.041$) over the course of the study. However, the quetiapine group was not significantly different from the placebo group. In addition, cox regression analyses yielded non-significant differences ($p = .65$) between groups in predicting sobriety, as defined as three weeks negative UDS.

Conclusions: This study did not find group differences between the quetiapine and placebo arms, indicating that quetiapine does not appear to be beneficial in the treatment of cocaine dependence.