

OLANZAPINE IN DIFFERENT FORMULATIONS: THE SAME DRUG WITH DIFFERENT EFFECTS?

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Changing an antipsychotic's original formulation that has already been used successfully in treatment by a generic formulation is the common phenomenon in day-to-day clinical practice. This manipulation may result in a higher treatment efficiency, but also in complications that include relapse and an increase of the treatment costs.

Here is the case report of the patient who became destabilized after changing an original drug by generic drug. The patient, 25 years old, has been treated since 2005, under a variety of diagnoses from the range of psychotic disorders. Dominant symptoms were psychosocial withdrawal, emotional indifference, fear of interpersonal contacts, suicidal ideas, anhedonia, and a sense of emotional emptiness, feeling of exhaustion of vital resources, and religious personal introspections about the meaning of life, good and evil, with the consequent feeling of guilt. Disease has significantly impaired the patient's family, professional and social functioning. He started to study history and sociology at the university, tried to work in his father's car shop, but without success.

During 2008, through outpatient care, new therapy was introduced including aripiprazole 3.125 mg in the morning, venlafaxine 2x37.5mg, Omega-3 2x1000mg, and as evening therapy olanzapine in the oral dispersible form, Zyprexa Velotab in the dose of 1.25 mg. By the time, the patient entered the satisfactory remission. In early 2009, the patient's GP prescribed orodispersible Zalasta Q tab with slower dispersion and in smaller sized tablets. Next day the patient's condition deteriorated in terms of frequent night awakenings, restlessness, wariness, pessimism, suicidal ideas, and fatigue, which is the patient's main preoccupation. Immediately after restoring original olanzapine the above symptoms disappeared.

From good clinical practice view, switching an original antipsychotic's formulation to generic formulation may be risky and should not be a routine practice to decrease treatment costs. Due to the necessary economic restrictions, but respecting the best interest of particular patient, it is more advisable to use a generic drug from the treatment's very beginning.