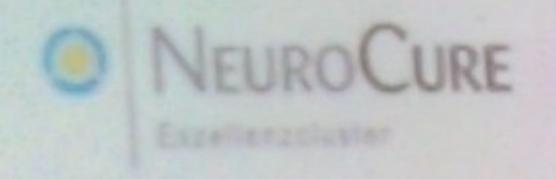


BACLAD study

of Psychiatry







## BACKGROUND

 Up to 85 % of alcohol-dependent patients relapse after detoxification (Helzer et al., 1985)

\* Only a few substances approved for the treatment of AUD

Modest effects of current pharmacotherapies
 (Rösner et al., 2010; Jonas et al., 2014)



### BACLOFEN

- \* Selective y-aminobutyric acid (GABA)-B receptor agonist
- \* Approved for the treatment of spasticity resulting from various neurological conditions
- \* Tuz 6,8 ± 0,7 h
- \* Tmax: 1,4 2,8 h
- Oral bioavailability > 85%
- > 80% renal elimination



## BACLOFEN: PRECLINICAL EVIDENCE

GABA-B receptor involved in alcohol related behaviors (Colombo et al., 2002, 2004)

GABA-B receptors located in several brain areas including the mesolimbic dopaminergic reward system (Bowery et al., 1987)

Baclofen modulates dopaminergic transmission in the mesolimbic reward system (Fadda et al., 2003)

Baclofen suppresses the acquisition and maintenance of alcohol drinking behavior in rats (Agabio & Colombo 2014)



# BACLOFEN: CLINICAL EVIDENCE - RCTS

					•Proportion of abstinent patients † •Cumulative abstinence duration †	
Addolorato et al., 2011						
				30 mg		

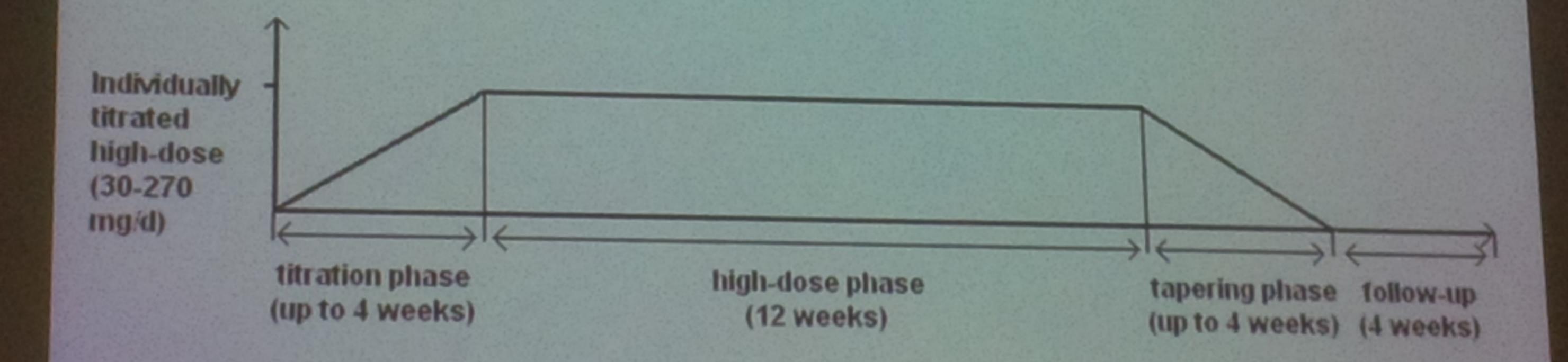


#### RATIONALE

- \* Evidence from preclinical and clinical studies for the efficacy and safety of baclofen in AUD
- RCTs using low to medium dosages (30-80 mg/d) have shown mixed results
- Several positive case reports of high-dose baclofen (up to 270 mg/d) in AUD (Ameisen et al., 2005)
- · Low ability of baclofen to cross the blood brain barrier (Taira, 2009)

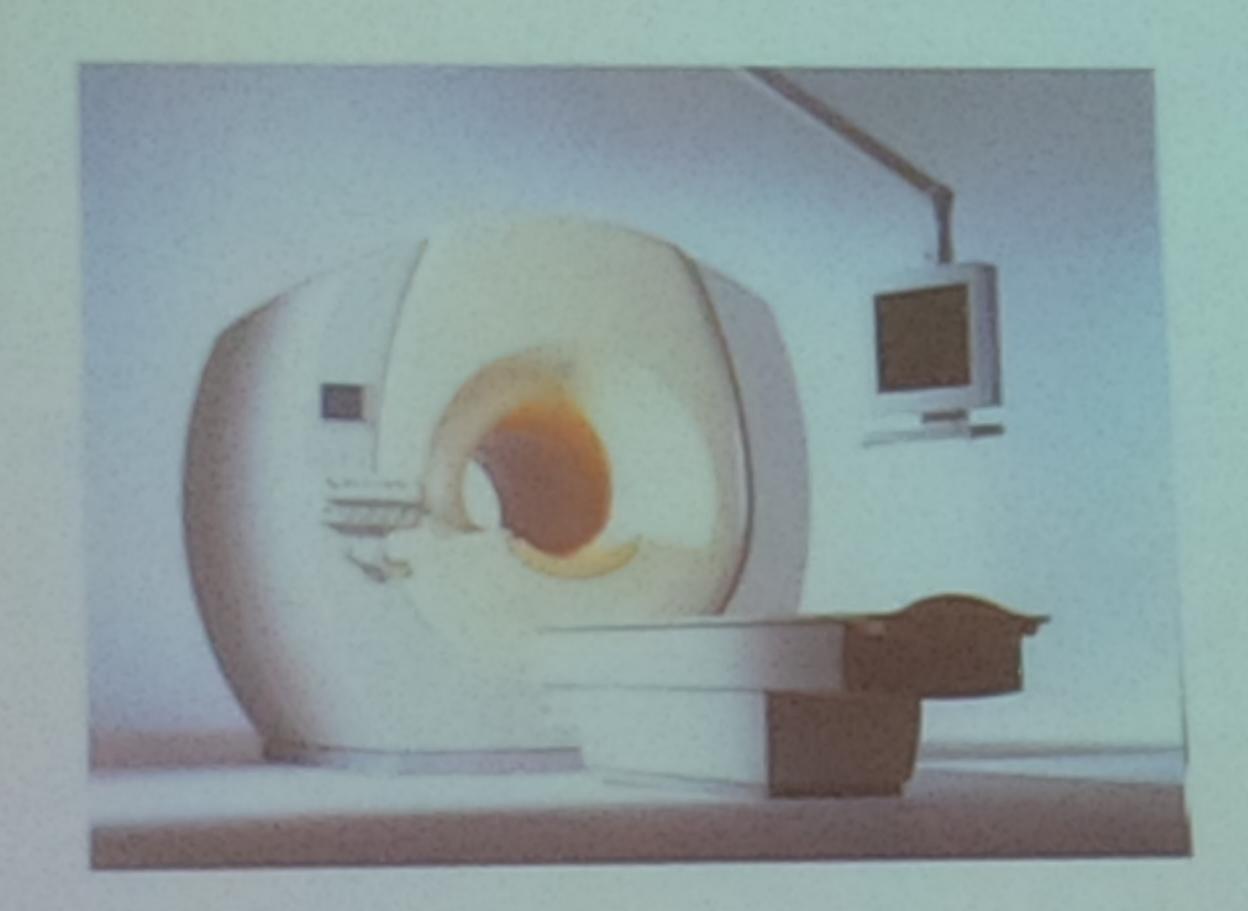


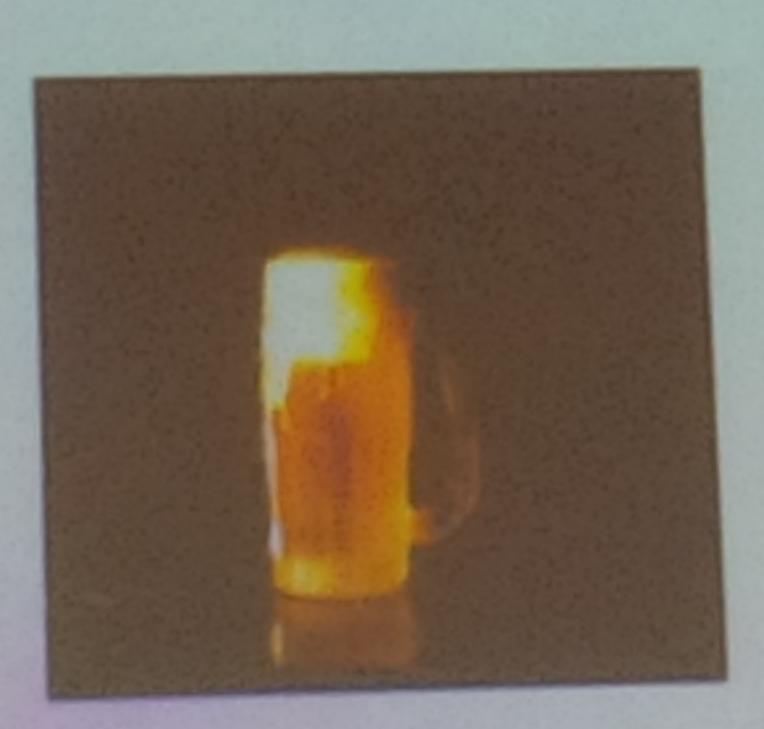
## TRIAL PROFILE

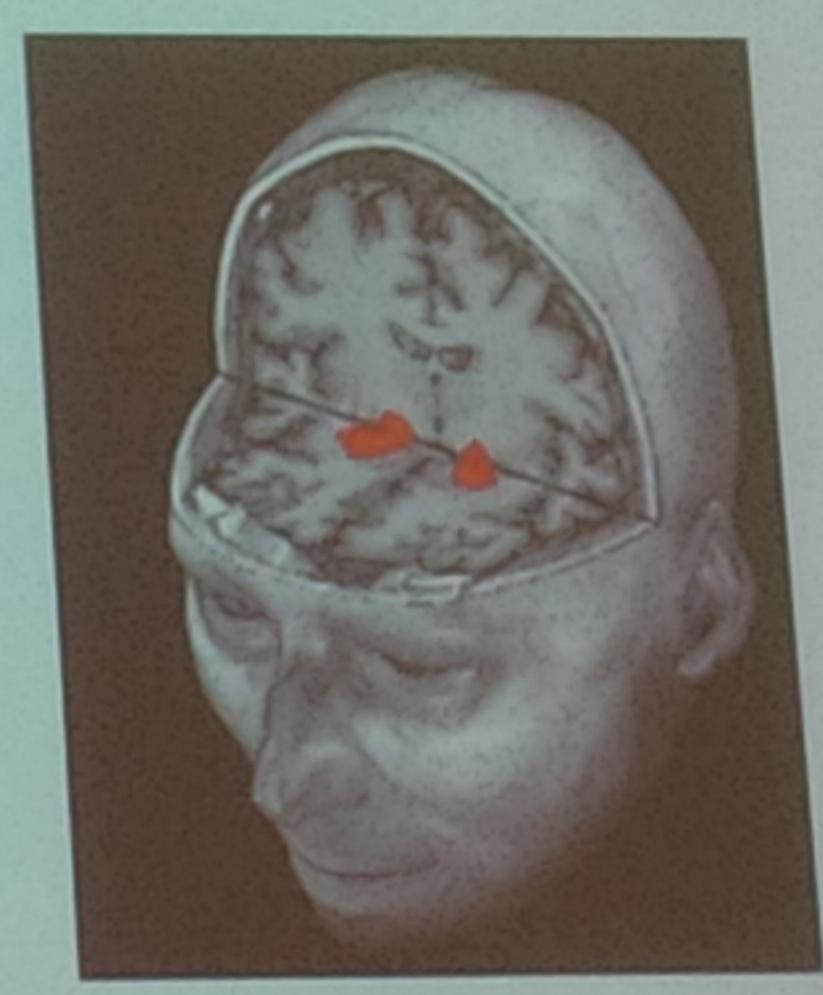


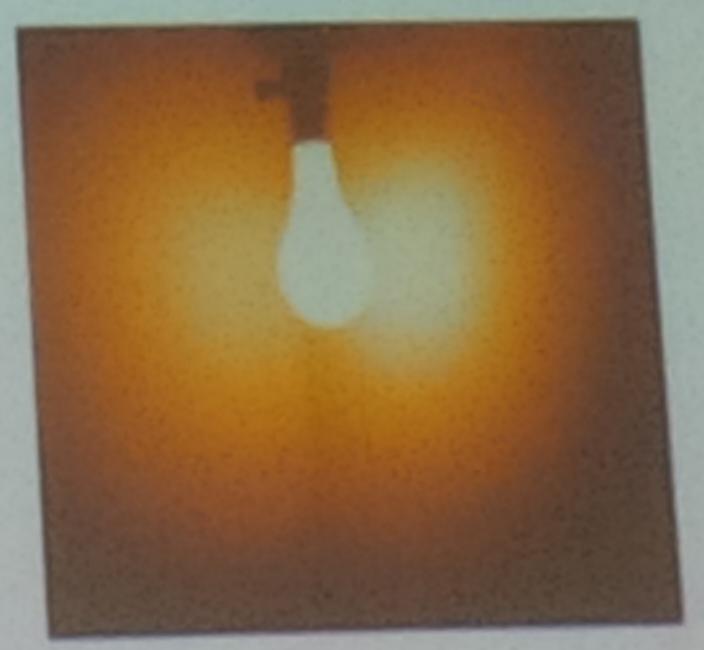


#### FMRI CUE-REACTIVITY









CHARITÉ

## KEY INCLUSION / EXCLUSION CRITERIA

#### INCLUSION CRITERIA

- Women & men: age of ≥
   18 and < 65 years</li>
- Diagnosis of alcohol dependence (ICD-10 & DSM-IV-TR)
- Alcohol consumption of at least 2 HDD per week + an overall alcohol intake of 21/14 drinks per week (men/women)
- Completed detoxification before randomization
- Last alcohol consumption
   within 7 to 21 days

#### **EXCLUSION CRITERIA**

- Significant internal, psychiatric (axis I diagnoses other than alcohol or nicotine dependence) or neurological conditions
- Current treatment with psychotropic drugs that could affect study outcome
- · Epileptiform convulsions



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## OUTCOME MEASURES

#### Primary outcome measures:

- Total abstinence during high-dose phase
- Cumulative abstinence duration during high-dose phase

#### Secondary outcome measures:

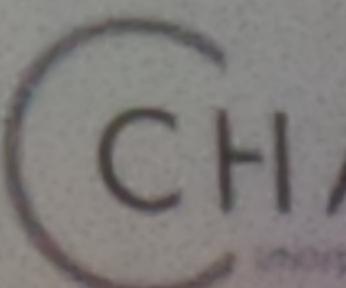
- Safety and tolerability of the study drug
- Drop-out rate
- · Changes in psychiatric assessments compared to baseline



# CLINICAL CHARACTERISTICS

Characteristics				
Sex [n (%)] Male				
		47.4±7 (32-59)		
		(32-37)		
Secondary modern school-leaving certificate, year 5-10	1 (3.6)			
University-entrance diploma Technological college				

Exact Chil-square test.

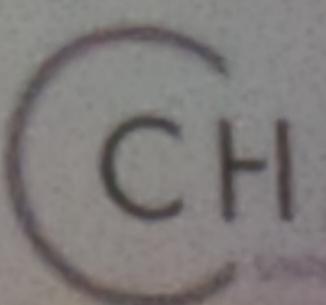


Exact Mann-Whitney U test.

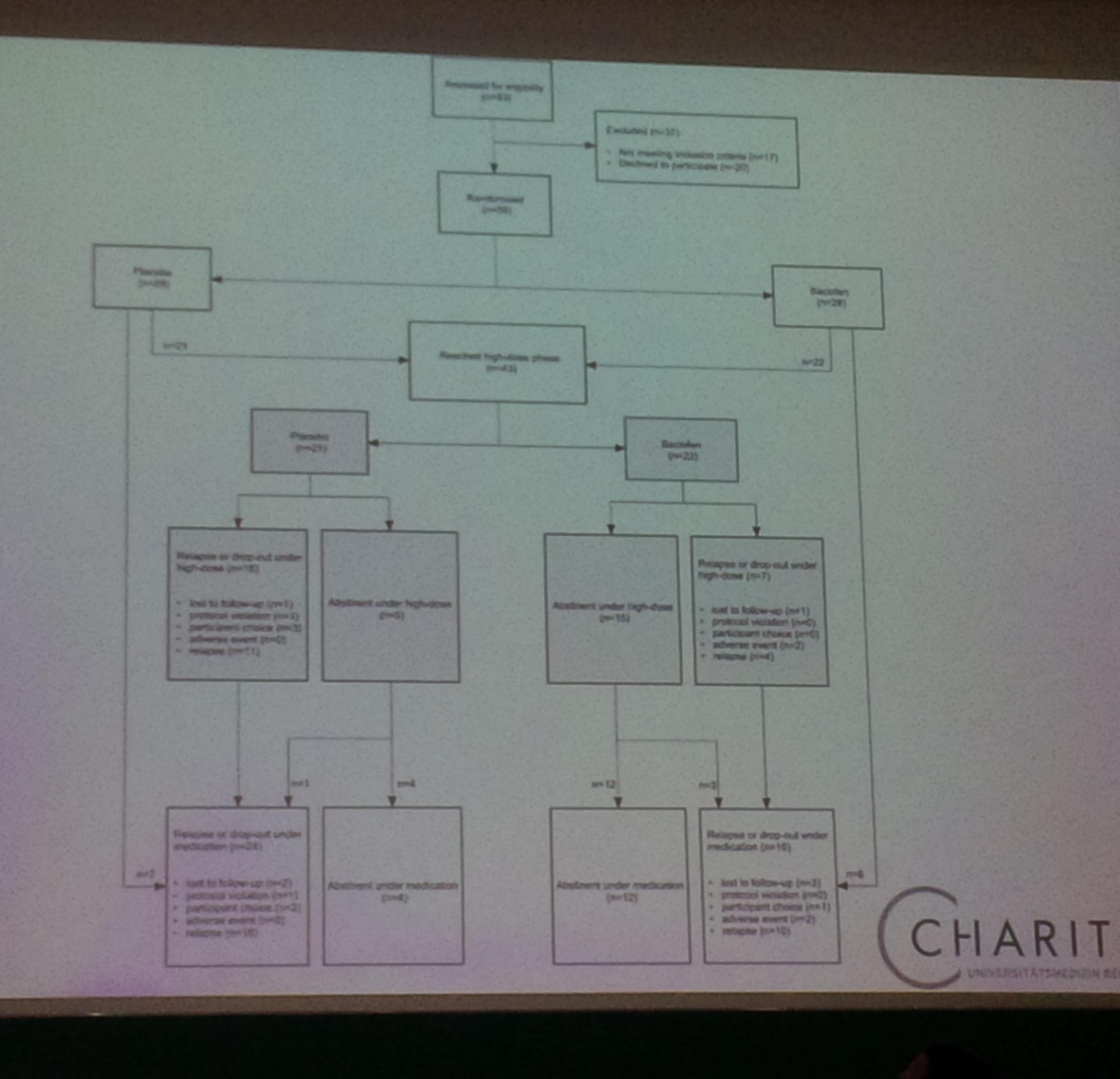
# CLINICAL CHARACTERISTICS

University-entrance diploma Technical college				

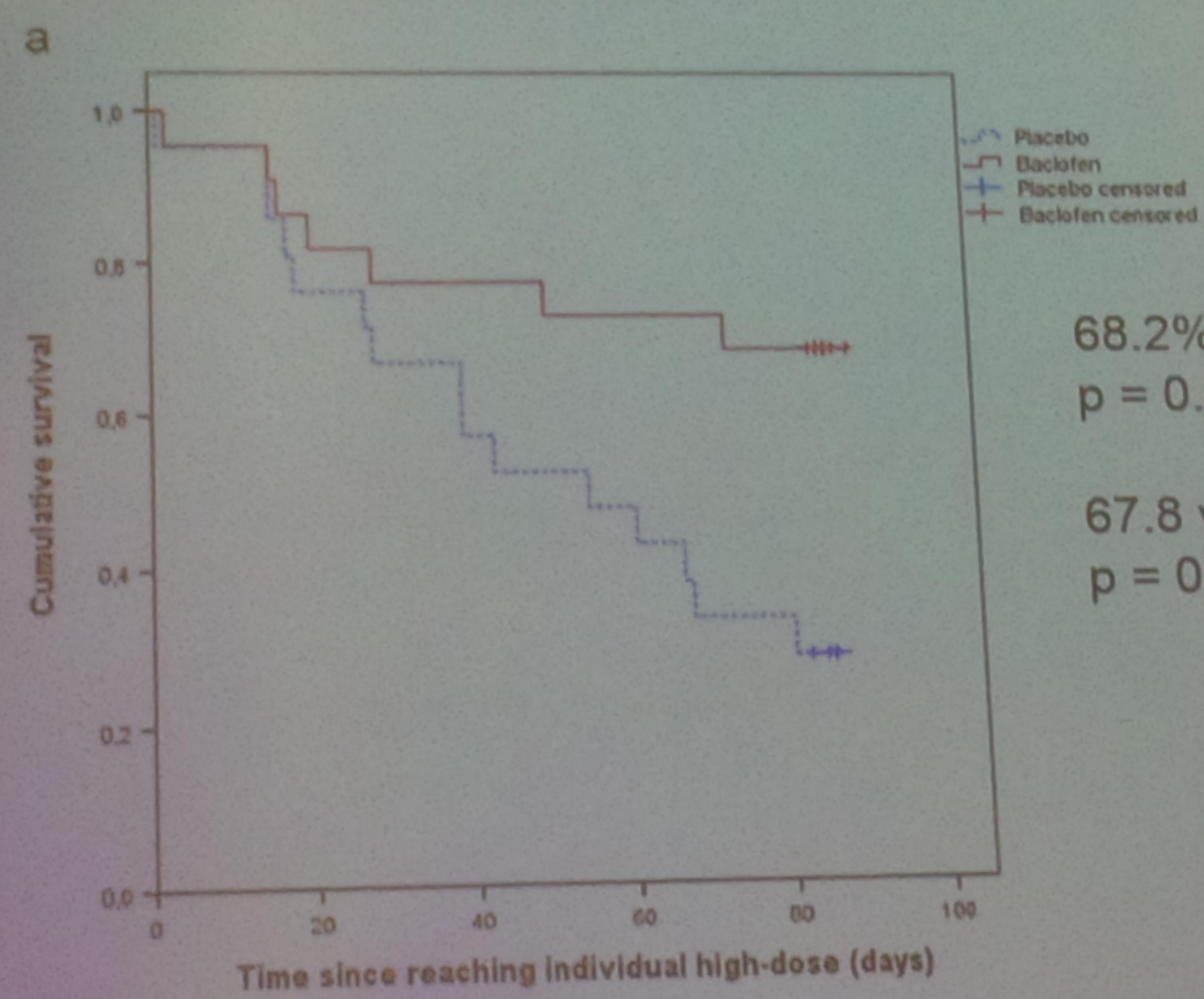
<sup>\*</sup>Exact Chit-square test.



Exact Mann-Whitney U test.

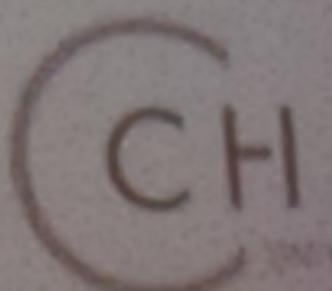


#### HIGH-DOSE PHASE

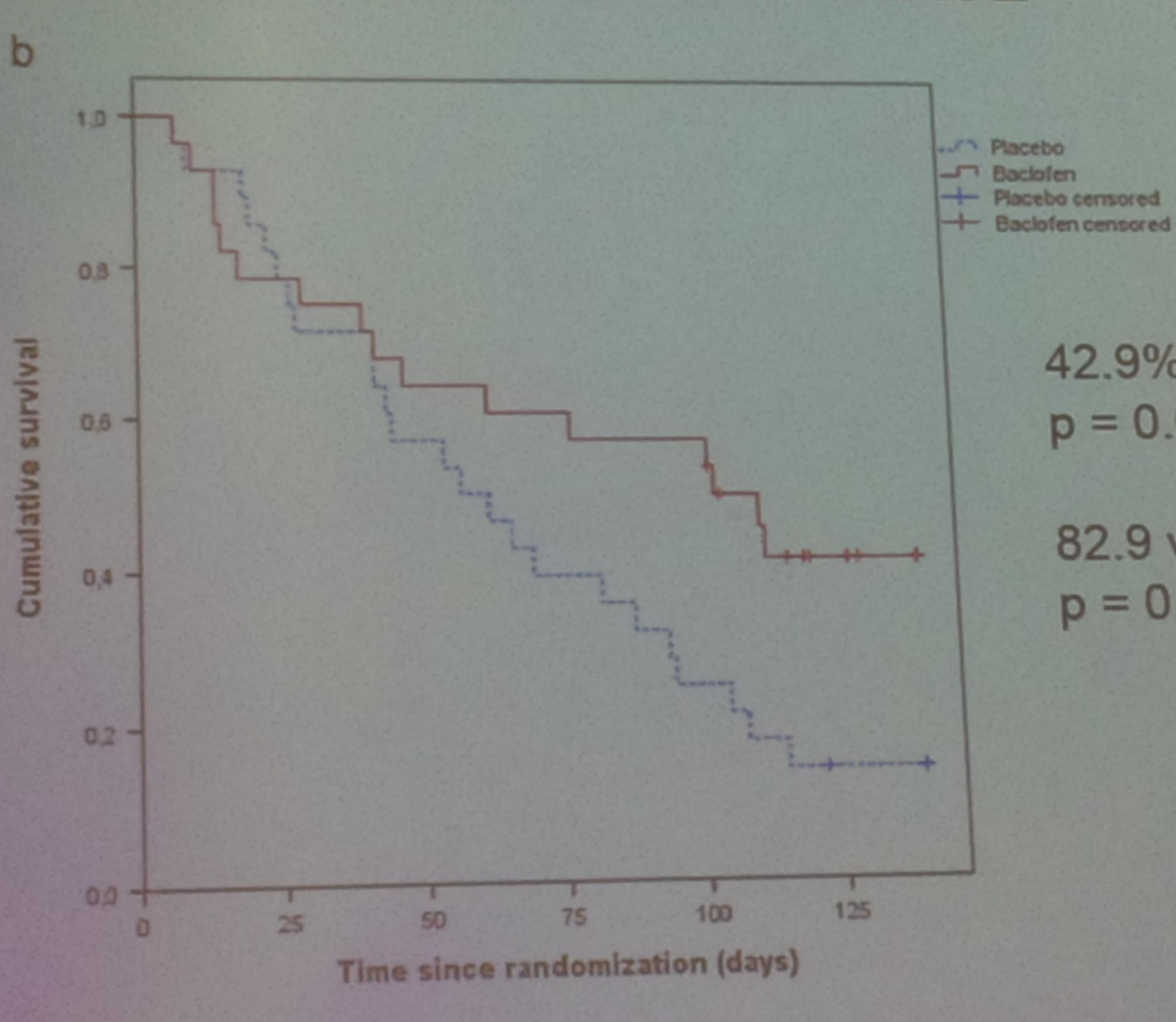


68.2% vs. 23.8% p = 0.014

67.8 vs. 51.8 days p = 0.047



## COMPLETE MEDICATION PHASE

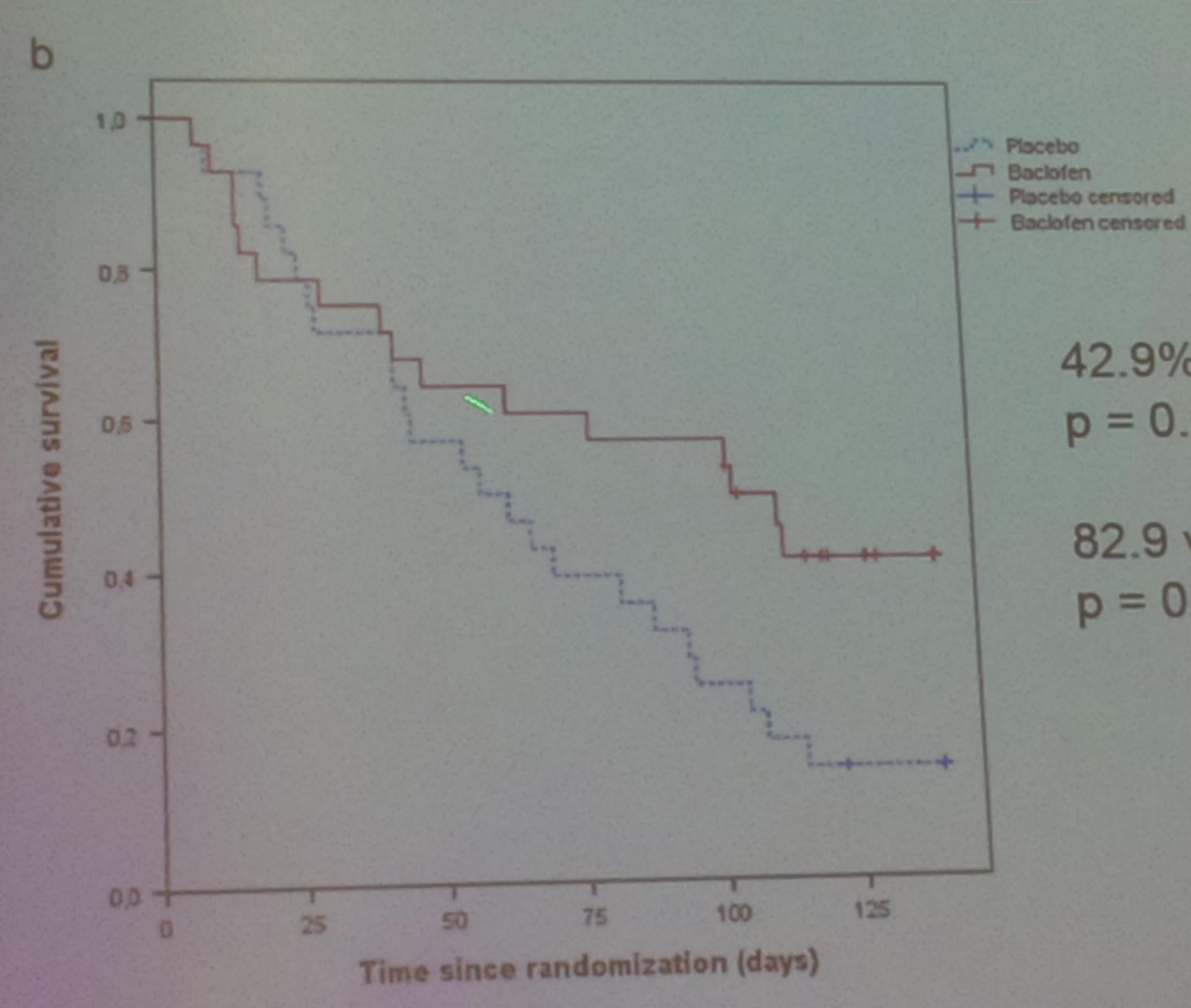


42.9% vs. 14.3% p = 0.037

82.9 vs. 66.8 days p = 0.241



### COMPLETE MEDICATION PHASE

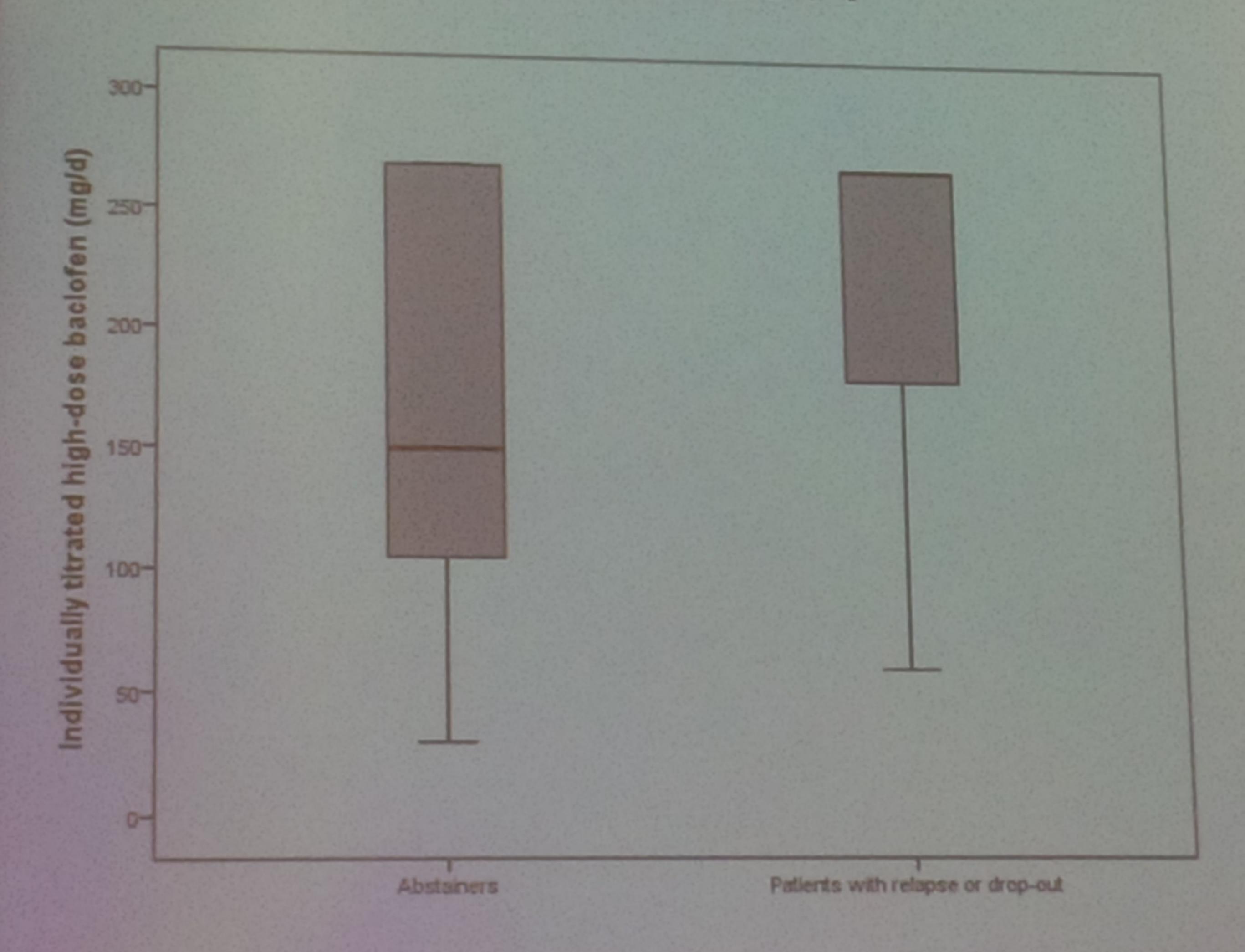


42.9% vs. 14.3% p = 0.037

82.9 vs. 66.8 days p = 0.241



## DOSE-RESPONSE EFFECT?





### ADVERSE EVENTS

\*Exact Chi-square test.



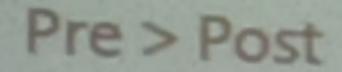
### ADVERSE EVENTS

Exact Chi-square test.

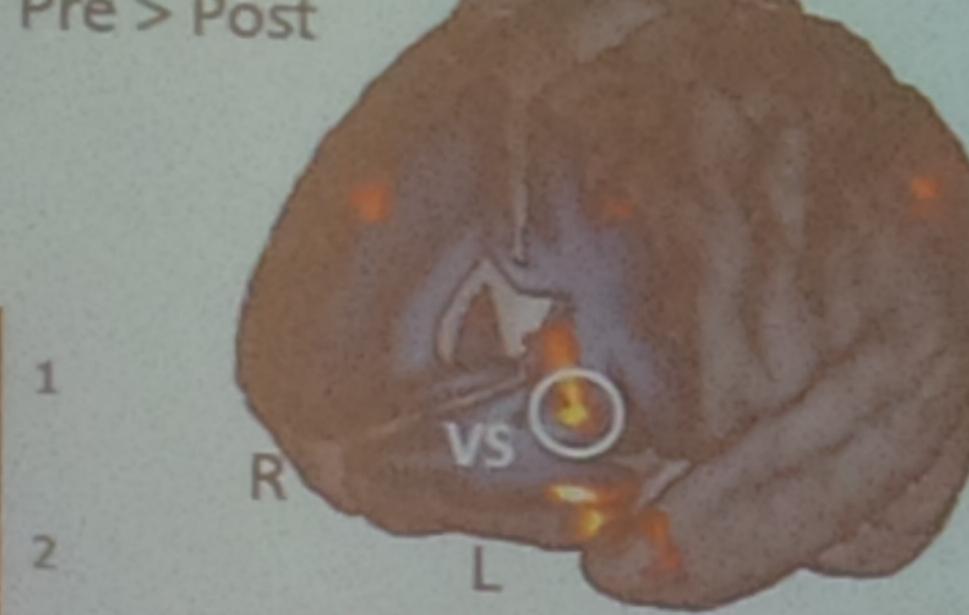


## FMRI CUE-REACTIVITY

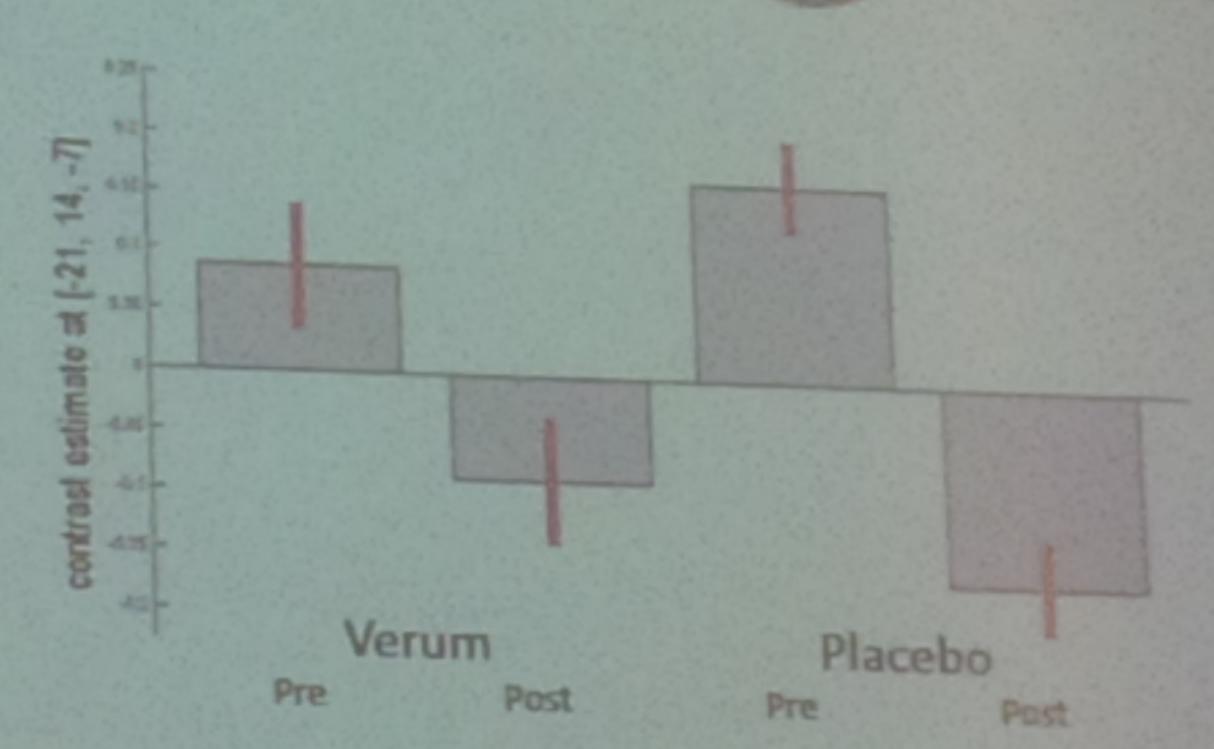
# CHARITÉ



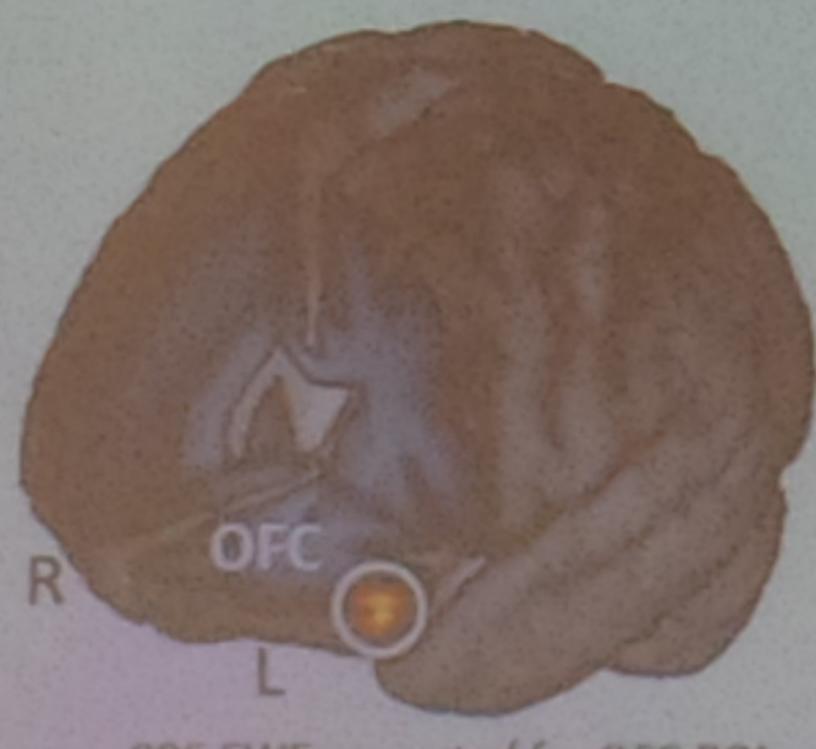
6



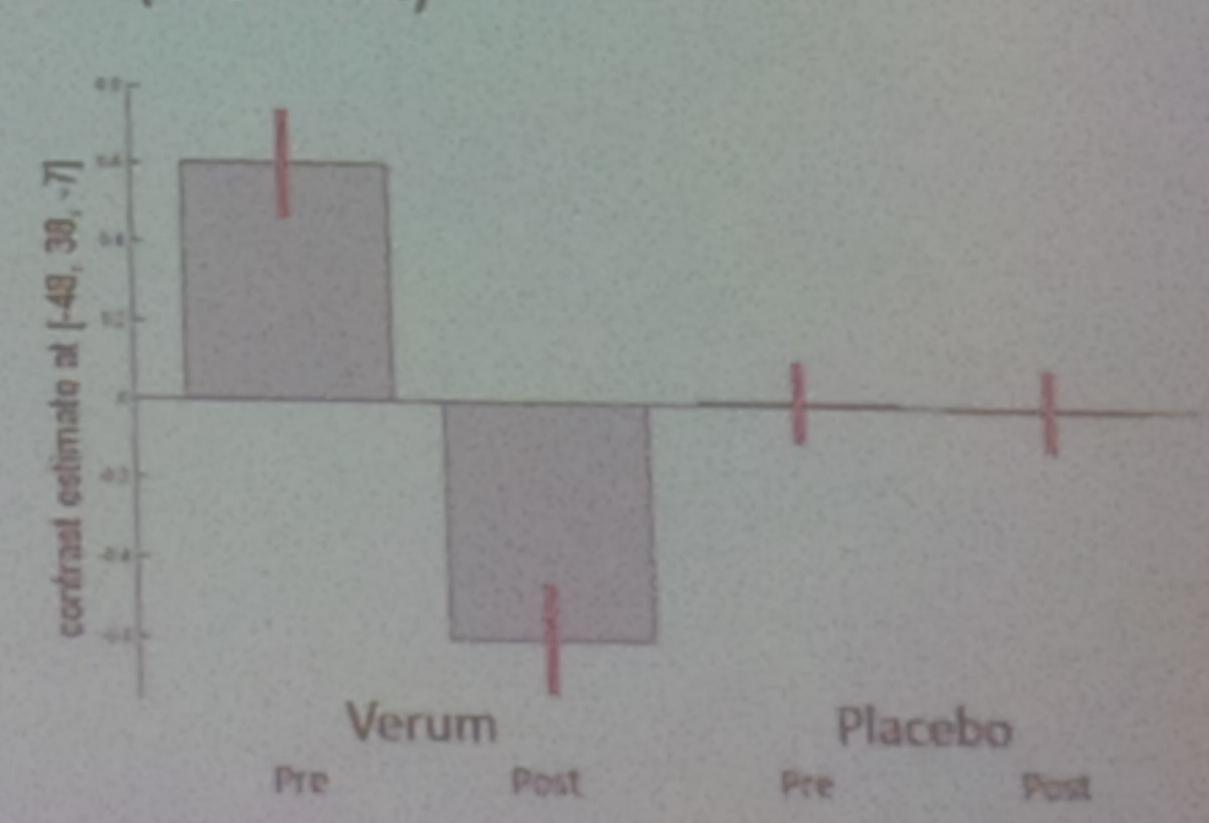
p = .039 FWE corrected for whole brain



#### Verum (Pre>Post) > Placebo (Pre>Post)



p = .006 FWE corrected for OFC-ROI



Beck et al., in preparation

#### SUMMARY

- Individually titrated high-dose baclofen supported alcohol-dependent patients effectively in maintaining alcohol abstinence
- \* Baclofen showed a high tolerability
- No evidence for abuse liability
- Efficacy does probably not depend on a clear cut-off dose
- Dosing needs to be conducted individually including close monitoring



## QUESTIONS

- Replication of results
- Responding subtype
- \* Role of composition
- Dosing
- \* Reduction of alcohol consumption

