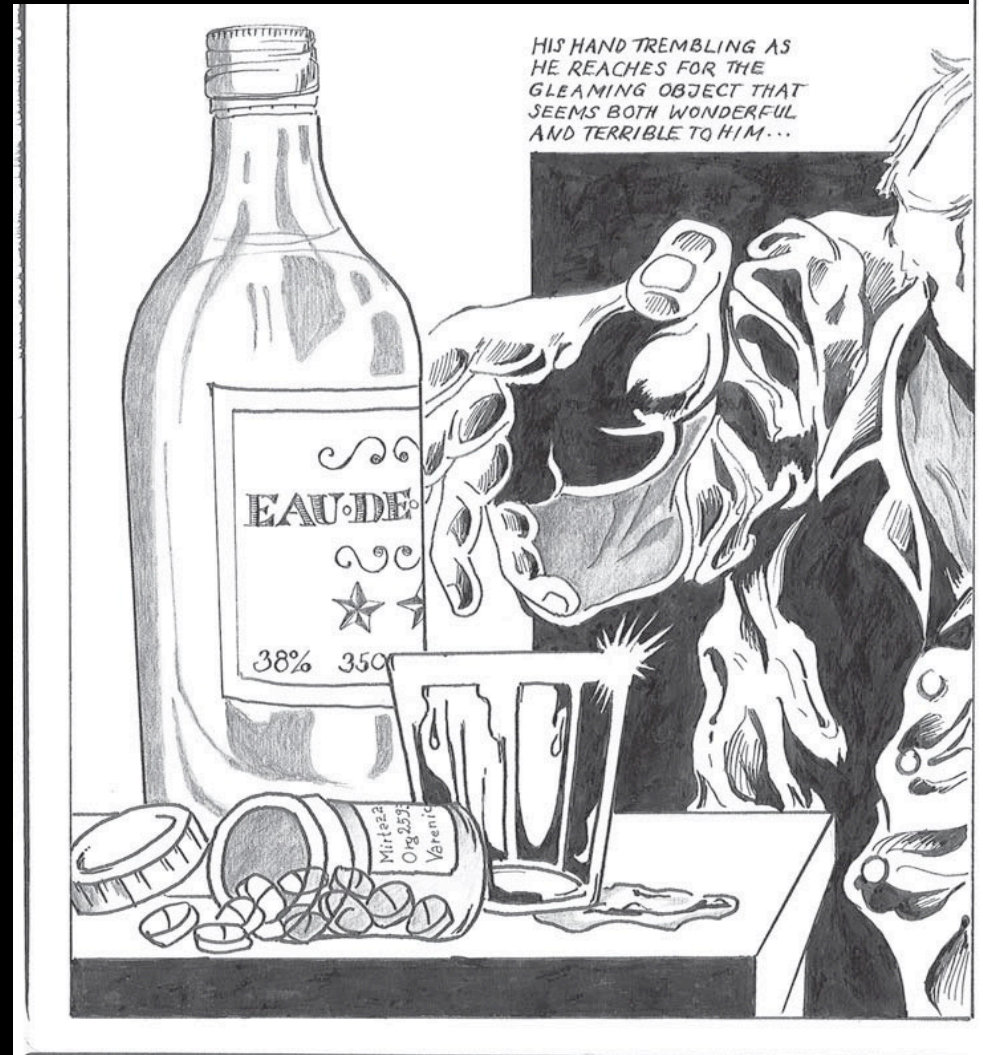


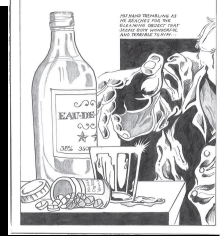
LÄKEMEDEL VID ALKOHOLBEROENDE – FRAMTIDA MÖJLIGHETER

Regional
Läkemedelsdag
26 oktober 2017

Andrea de Bejczy, MD, PhD
Addiction Biology Unit – Clinical Trials
Inst Neuroscience & Physiology
Sect Psychiatry & Neurochemistry
Sahlgrenska Academy



THE HISTORY OF THE DIAGNOSE



Ancient Mesopotamians
birth defects

Hippocrates
abstinence

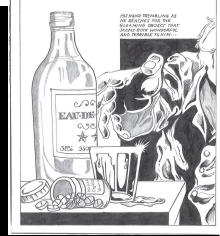
11th cent.
inflammation of the liver

1774 The Mighty Destroyer
1784 disease treated by physicians

1849 Huss
Alcoholismus Chronicus

Early 1900 S
institutions and detox

THE HISTORY OF ALCOHOL TREATMENTS



Late 1800s

The Keely cure

coca, morphine, arsenic, strychnine

side effects: death and insanity

Late 1800s

Laudanum

morphine

side effects:

morphine dependence

1930s

Adverse therapy

1950s US

Serum therapy

prisons and asylums

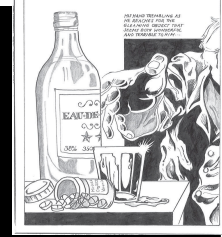
1920s US

sterilization

1948-52

9 cases of lobotomy

TREATMENTS OF TODAY



Acamprosate (Campral) approved 2004

Meta analyses show NNT 7.5 (abstinence)

Maisel et al., 2013

Health economic studies show life-time savings

Palmer et al., 2000, Foster et al., 1999, Schadlich et al., 1998

No difference in effect with different psychosocial support

deWildt et al., 2002, Hammarberg et al., 2004

Naltrexone approved 1994

Meta analyses show effects from NNT 8.6 (prevention of return to heavy drinking)

Maisel et al.,

to NNT 13 (short term treatment effects) and a relapse risk reduction of 36% Rosner et al., 2010

Disulfiram (Antabus)

Serendipity 1940s

Heughes et al., 1997

Meta analyses show superiority to placebo

Jorgensen et al., 2011

Long term supervised superior to acamprosate

Diehl et al., 2010

Treatment gap in Europa 92%

depression 45 %

bipolar 40 %

Kohn et al., 2004

NEW POTENTIAL TREATMENTS



topiramate

Anticonvulsant GABA_A

**7 RCTs meta analysis
show good effect size
Blodgett et al., 2014**

baclofen

Spacticity GABA_B

**Few and small studies
Brennan et al., 2013
Effect on alc+liver
disease w no liver side
effects
Adolorato et al., 2007**

ondansetron

**Antiemetic
5-HT₃ antagonist**

**Effect in early onset
alcoholics
Johnson et al., 2000, Kranzler et
al., 2003**

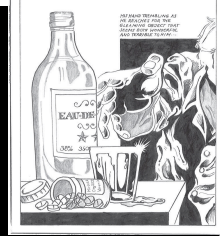
**sodium
oxybate**

Illegal drug GHB

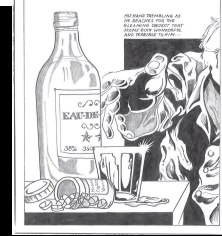
**Approved in Italy and
Austria for both withdrawal
and abstinence
maintanance
Keating et al., 2014**

NEW POTENTIAL TREATMENTS - MIRTAZAPINE

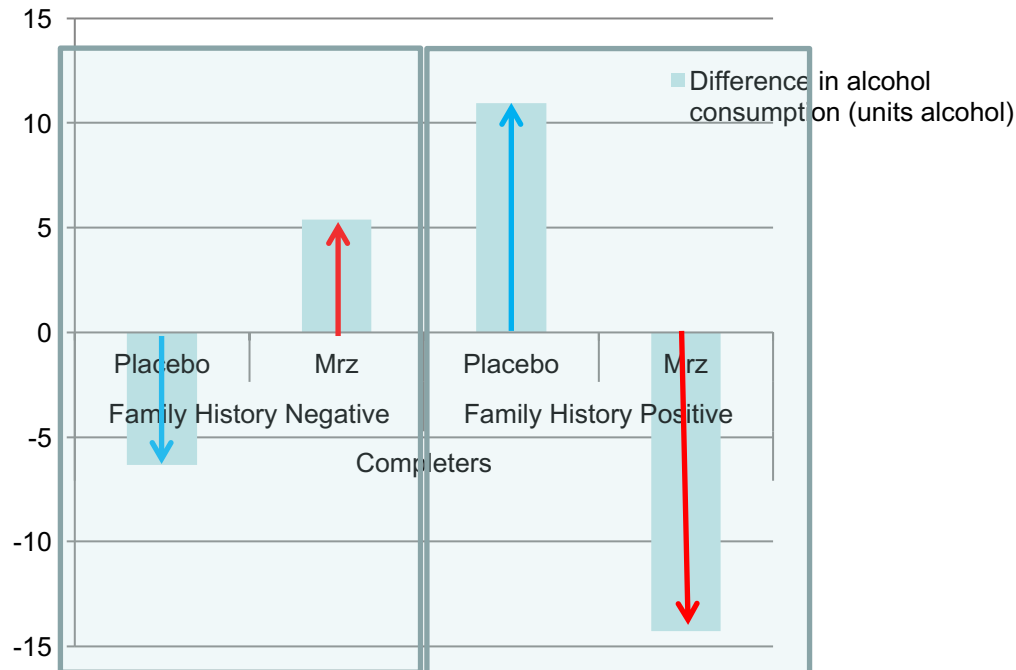
**Antidepressant
with serotonergic &
noradrenergic action**



NEW POTENTIAL TREATMENTS - MIRTAZAPINE



difference in mean weekly alcohol consumption, baseline compared to active treatment period (w3-10)

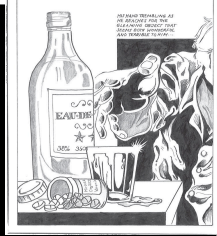


A de Bejczy et al., 2015

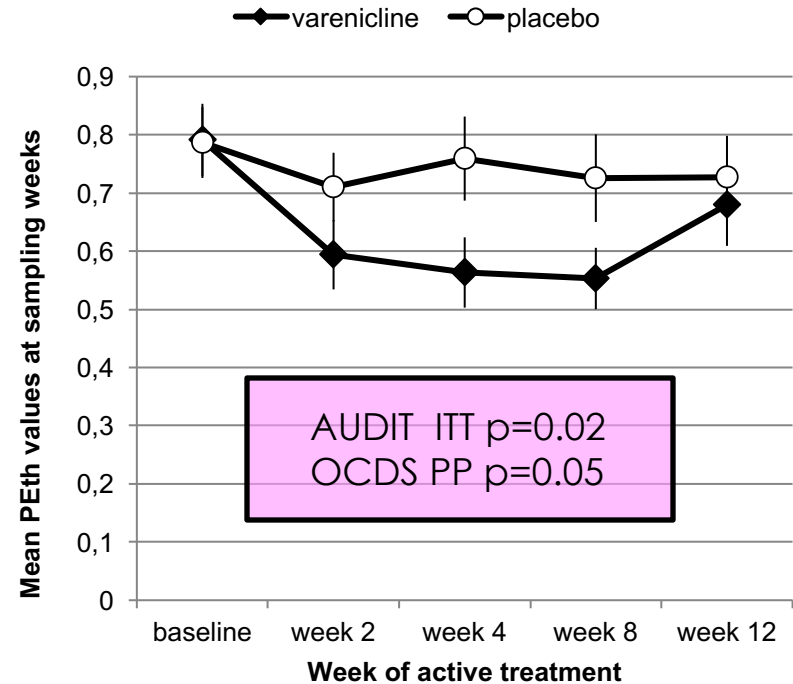
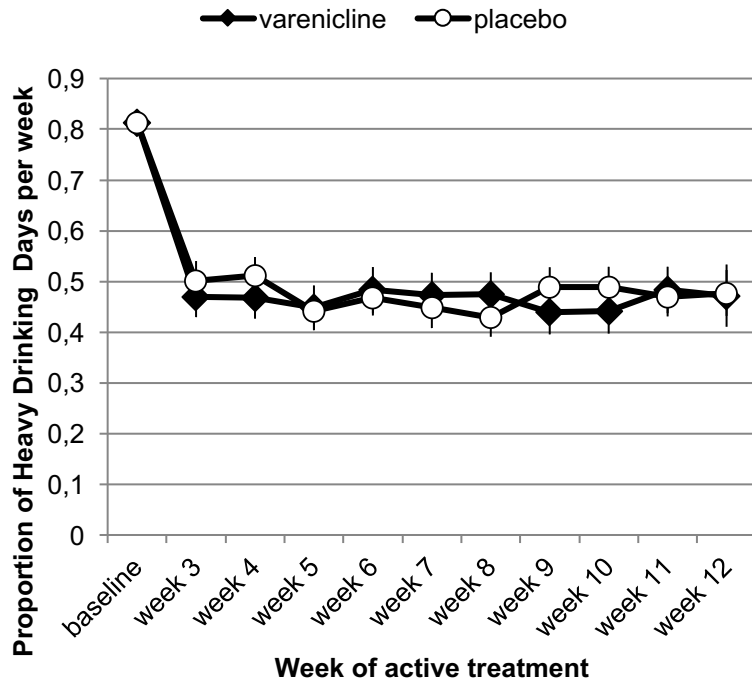
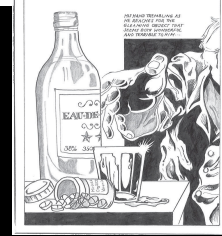
mirtazapine lowered alcohol intake in males with high alcohol consumption and heredity for alcohol use disorder

NEW POTENTIAL TREATMENTS - VARENICLINE

smoking cessation drug (Champix)
acts on nicotinic acetylcholine receptors
(nAChRs)



NEW POTENTIAL TREATMENTS - VARENICLINE

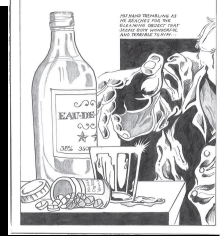


A de Bejczy et al., 2015

self-reported consumption
showed no difference between
treatment groups ($p=0.73$)

PEth as outcome showed
treatment effect ($p=0.02$)

BIOMARKERS



PEth was the alcohol marker that correlated best with self-reported alcohol consumption

Table 5 Spearman's correlations between blood levels of PEth/ CDT/GGT as the mean for week 2, 4 and 8 of active treatment period and reported alcohol consumption as the mean number of drinks over the active treatment period

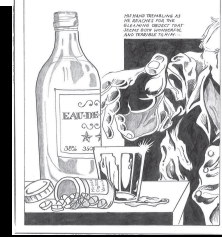
Alcohol marker	All (95% CI)	Varenicline (95% CI)	Placebo (95% CI)
PEth	0.51 (0.35 ;0.65)	0.61 (0.40; 0.76)	0.42 (0.16; 0.63)
CDT	0.36 (0.19; 0.52)	0.54 (0.29; 0.72)	0.15 (-0.11; 0.39)
GGT	0.26 (0.06; 0.45)	0.42 (0.12; 0.66)	0.10 (-0.16; 0.35)

PEth: phosphatidylethanol, CDT: carbohydrate-deficient transferrin, GGT: γ - glutamyltransferase, CI: confidence interval

A de Bejczy et al., 2015

the varenicline group showed better correlation than the placebo group

A HETEROGENOUS DISEASE



State marker
Related to recent
drinking - biomarkers

Phenotypes

delta gamma
(severity)
Jellinek, 1960

Type I Type II
(enviromental vs inherited)
Cloninger, 1987

Lesch typology I-IV
(drinking pattern and craving)
Lesch et al., 1988

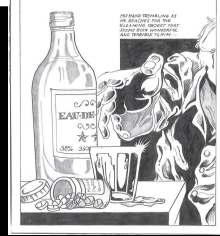
Type A Type B
(severity, age of onset and prognosis)
Babor et al., 1992, schuckit et al., 1995

Early onset (EOA) vs Late onset (LOA)
Proxy for inherited and biological
vulnerability
Johnson et al., 2000

Trait markers
Factors associated with
increased risk, present
before and related to
disease

Heritability
Personality traits
Response to alcohol
Genetics

PRECISION MEDICINE



**Polymorphisms and
treatment response**

Acamprosate

Kiefer 2011

Naltrexone

Oslin 2003

Topiramate

Kranzler 2014

Ondansetron

Kenna 2014

Sodium oxybate

**Lesh typology more
severe better effect**

Caputo et al., 1988

Combinations?

Ondansetron

**Early Onset Alcoholics,
gene variation?**

Johnson 2011

ABSTINENCE VS HARM REDUCTION

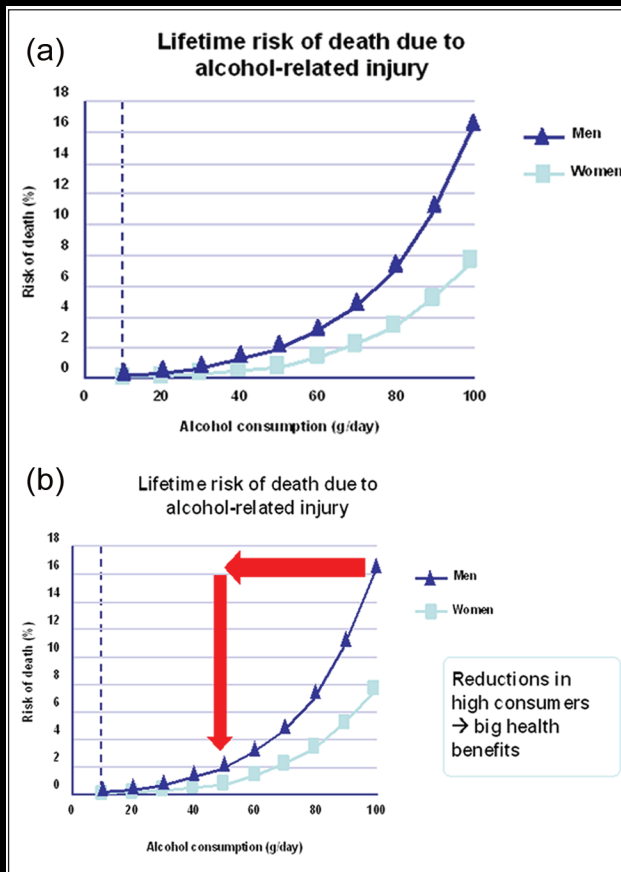
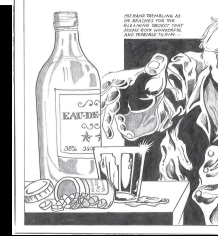
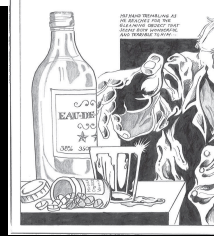
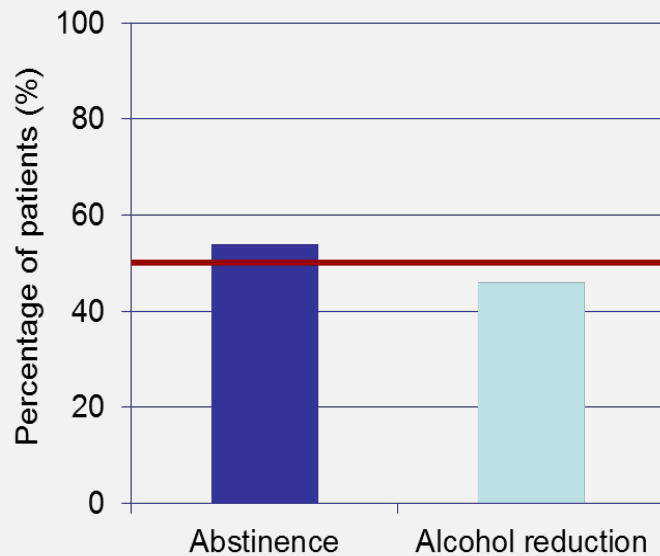


Figure 2. Lifetime risk of death due to alcohol-related injury, and the effect of reduction of consumption (adapted from Rehm J, Zatonski W, Taylor B, et al. (2011) Epidemiology and alcohol policy in Europe. *Addiction* 106: S11–S19 with permission from John Wiley & Sons, Inc). (a) shows the exponential rise in alcohol-related injury deaths with increase in intake; (b) shows how a 50% reduction in consumption from 100 g/day gives an eight-fold benefit in terms of harm. Note that these calculations are based on sustained changes. **Nutt et al., 2014**

TREATMENT GOALS

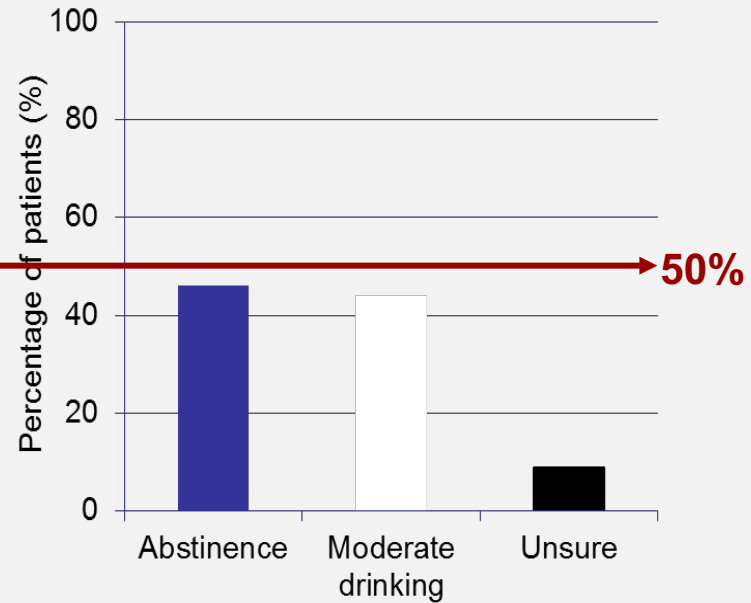


UK survey of patients with alcohol problems (n=742)



Treatment preference

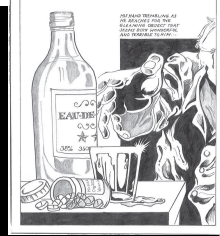
Canadian study of patients with chronic alcoholism (n=106)



Treatment preference

Heather et al. *Alcohol Alcohol* 2010;45(2):128–135;
Hodgins et al. *Addict Behav* 1997;22(2):247–255

STUDY DESIGN



outcome measures objective vs subjective

abstinence or harm-reduction detoxification or not

participation effect brief intervention, support, placebo,

selection demographics and motivation

the subject individual effect of the drug and dose

analysis Intention-To-Treat vs Per Protocol (compliance)

colleagues and collaborators in performing the RCTs

The Addiction Biology Unit

Bo Söderpalm
Elin Löf (now at Lundbeck)
Andrea de Bejczy
Barbro Askerup
Cecilia Nilsson-Wallmark
Helga Lidö
Gunilla Barr
Anna Gordh

Pre-clinical

Mia Ericson
Louise Adermark
Rosita Stomberg
Lisa Ulenius
Yasmin Olsson
Anna Andrén
Klara Danielsson

Department of Laboratory Medicine, Lunds Universitetssjukhus

Anders Isaksson
Lisa Walther

Beroendecentrum, Karolinska universitetssjukhuset, Solna

Johan Franck
Joar Guterstam
Anders Hammarberg

Beroendekliniken, Universitetssjukhuset MAS, Malmö

Gulber Asanovska

Statisticians

Anna Wiklund
Kerstin Wiklander

Monitor

Benita Gezelius