

Information and Advice to Prescribers

The pharmacokinetic parameters of the 2 formulations are similar. Immediate release (IR) and modified release (MR) formulations reach the same peak plasma concentration (C_{max}); however the time taken to reach C_{max} is 1.5 hours and 6 hours respectively.

All patients who are to be initiated on quetiapine should receive quetiapine IR except for acutely unwell patients in whom the simplified titration regimen with MR formulation can be used for the first 3 days, after which the IR formulation should be used.

Patients currently stabilised on MR formulation should where possible be switched to IR formulation, unless there are significant clinical reasons not to do so, such as side-effects and adherence issues.

The switch may be associated with a slightly higher risk of sedation and postural hypotension. If sedation and postural hypotension are a concern then a larger proportion of the dose could be given at night e.g. 600mg MR at night could be changed to 200mg IR in the morning and 400mg IR at night (see table 1).

Quetiapine IR is usually administered twice a day, however, it is licensed to be used once a day for the treatment of **depressive episodes in bi-polar disorder**.

If the IR formulation is to be used once a day, then this should be taken at night to minimise side-effects such as hypotension. For reasons of safety it is recommended that the maximum single dose of IR formulation should not exceed 400mg.

There is very little difference in terms of side-effects between quetiapine MR and quetiapine IR. There may however be patients who do not tolerate quetiapine IR but are able to tolerate quetiapine MR, which could justify the use of the MR formulation.

GPs may switch patients currently on quetiapine MR to IR, however they should seek approval from the relevant psychiatrist for each patient before doing so.

All changes to medication must be fully discussed, explained and agreed with the patient (and or their carer as appropriate). A patient information leaflet is available to help explain the reasons for the switch.

The first dose of IR formulation should be given approximately 24 hours after the last dose of the MR formulation.

Quetiapine MR Tablets should only be prescribed for:

- Acutely unwell patients for first 3 days after which IR tablets should be prescribed
- Where quetiapine is prescribed for adjunctive treatment of major depression
- Those who cannot tolerate the switch to IR tablets
- Those who are on a dose of quetiapine >600mg/day
- Those in whom it would be clinically inappropriate to use or switch to IR tablets

If quetiapine MR tablets are considered necessary, then these should be prescribed as branded

Zaluron[®], BiQuelle[®], Mintreleq XL[®], Sondate XL[®] or Ebesque[®] tablets

These brands contain the same active ingredients and have the same pharmacokinetic profile as other brands of MR Quetiapine.

Algorithm to aid review and switching from quetiapine modified release

Current dose quetiapine MR	Quetiapine IR dosing options		
	For those who are tolerating quetiapine well and do not have compliance concerns	For those who are (or at risk of) experiencing sedation or postural hypotension following the switch*	For those on quetiapine for depressive episode in bipolar affective disorder
100mg MR OD	50mg BD	25mg AM, 75mg ON	100mg ON
200mg MR OD	100mg BD	50mg AM, 150mg ON	200mg ON
300mg MR OD	150mg BD	100mg AM, 200mg ON	300mg ON
400mg MR OD	200mg BD	150mg AM, 250mg ON	400mg ON
600mg MR OD	300mg BD	200mg AM, 400mg ON	-
800mg MR OD	400mg BD	-	-

* Those at increased risk of experiencing sedation or postural hypotension following the switch to quetiapine IR may include: the elderly, those with learning disabilities, adolescents, concurrent cardiac medication and concurrent CNS depressants.

1. Harley, G. Briefing on immediate and modified release quetiapine formulations. London Procurement Partnership. September 2015
2. Seroquel (Quetiapine) Summary of Product Characteristics last updated on the eMC: August 2015. Astra Zeneca. Electronic Medicines Compendium: <http://emc.medicines.org.uk/>
3. Zaluron XL (Quetiapine) Summary of Product Characteristics last updated on the eMC: December 2014. Pharmathen S.A.. Electronic Medicines Compendium: <http://emc.medicines.org.uk/>
4. BiQuell XL (Quetiapine) Summary of Product Characteristics last updated on the eMC: December 2014. Pharmathen S.A.. Electronic Medicines Compendium: <http://emc.medicines.org.uk/>

Algorithm to aid review and switching from quetiapine modified release

