Market Investigation of Lurasidone & Levetiracetam

INTRODUCTION

Schizophrenia is a severe, enduring and debilitating mental illness that affects approximately 1.0% of the population throughout the world. It is the 4th leading cause of disability in the developed world for ages 15 to 44 years, inclusive. Schizophrenia reduces life expectancy by approximately 10 years, mostly because of suicide. Schizophrenia appears as a heterogeneous disorder, course of illness and treatment response. Patients with schizophrenia experience positive symptoms, negative symptoms, and cognitive deficits and typically have long-term profound psycho-social impairments and are often unresponsive in social situations and withdrawn. Anti-psychotics are the mainstay of pharmacological intervention in the treatment of schizophrenia. As there is large inter-individual variability in response to these drugs, several different anti-psychotic medications are often tried before the most appropriate one is found. Lurasidone is a new chemical entity belonging to the chemical class of piperidinyl-benzisoxazole derivatives. It has high affinity for dopamine D2- and serotonergic 5HT2A- and 5-HT7-receptors. Levetiracetam is a novel antiepileptic drug that has been demonstrated as being effective in the management of partial seizures. It is rapidly and completely absorbed after oral administration and it is predominantly eliminated as unchanged drug in the urine. Its metabolism is independent of the cytochrome P450 enzyme system, nor does it induce cytochrome P450 enzymes. The most common adverse events that differed between treatment groups and placebo control groups were somnolence, asthenia, dizziness and, infection in the US study, . Since levetiracetam was marketed, behavioural effects have been reported, namely irritability, agitation, anger and aggressive behaviour.

OBJECTIVES:

- To study the market sales of Lurasidone and Levetiracetam drug.
- To know the Doctors' behavior for prescribing Lurasidone and Levetiracetam drug.

METHODOLOGY

Sample size	:	50 (For Lurasidone), 50 (For Levetiracetam).
Sampling method	:	Probability Sampling.
Technique Used	:	Structured Questionnaire.
Type of data	:	Primary data was referred.
Type of study	:	Quantitative Study was done.
Study location	:	Chandigarh, Mohali and Ludhiana.
Study Duration	:	3rd April 2017 to 5th June 2017

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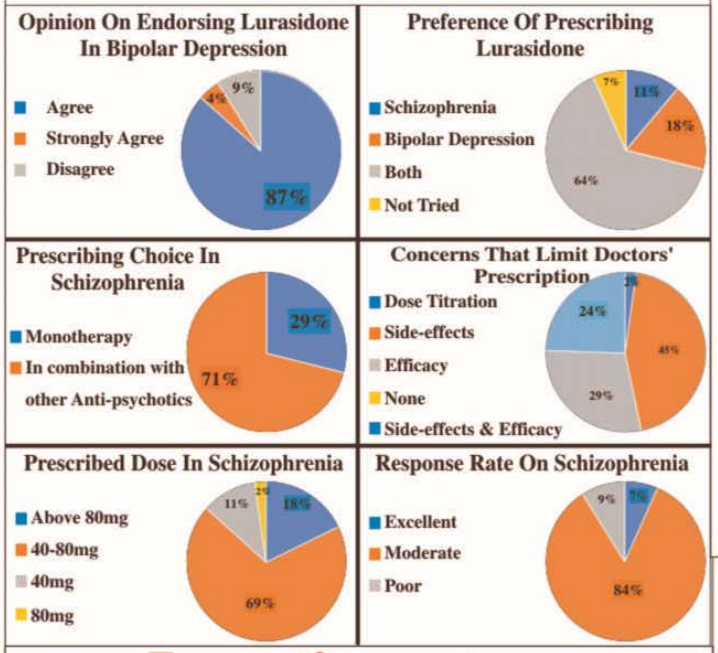
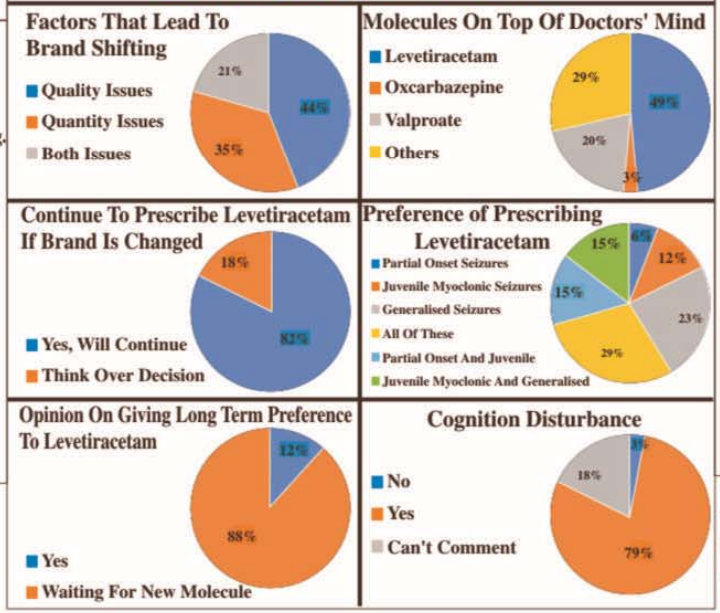
Lurasidone



Levetiracetam



CONCLUSION:

- Lurasidone and Levetiracetam both were doing very well in the market and were even appreciated by the doctors at every point the drug was making self-position in the market higher than that of other drugs
- Still 7% of the doctors said they hadn't tried lurasidone hence they should be asked for queries.
- Scrutiny should be paid why doctors were getting problem with the prescription of 80mg dose both in Schizophrenia (2%) and Bipolar depression (4%).
- 45% of the doctors said that side effects still limiting their prescription.
- 9% of the doctors were still getting poor responses in schizophrenia that need to be resolved.
- 9% of the doctors were still disagreeing with the fact of endorsing Lurasidone in Bipolar Depression.
- In case of Levetiracetam, still 79% of the doctors were saying that they get cognition symptoms from monotherapy of Levetiracetam.
- 21% of doctors still not seeing forward novel formulation of Levetiracetam. So, all these measures need to be taken down to obtain the best results out of it.

RECOMMENDATIONS:

For Lurasidone:

- Need to create awareness among the doctors about the drug so that their queries should be resolved and they can easily recommend the drug.
- More Emphasis should be paid on the 80mg drug dose as very few doctors are prescribing in Schizophrenia (2%) and Bipolar depression (4%).
- Doctors should be asked about the side effects and efficacy issues, if persisting.
- Doctors should be asked about their issues for not endorsing lurasidone in Bipolar Depression.
- Brand equity should be increased.
- Drugs along with company name printed on promotional articles\items such as clocks, Table calendars, Pens, Planners can be given to doctors as a source of reminder.

For Levetiracetam:

- More emphasis should be laid on price segment of the drug.
- As 88% of the doctors are waiting for new molecules, discussion along with them should be made to improve levetiracetam.
- Discussion along with doctors should be made to counter the cognition disturbances coming from levetiracetam.

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