



Clinical trial results:

A Randomized, Double-blind, Placebo-controlled, Parallel-group Study of Lumateperone for the Prevention of Relapse in Patients with Schizophrenia

Summary

EudraCT number	2021-002068-30
Trial protocol	BG PL
Global end of trial date	07 August 2024

Results information

Result version number	v1 (current)
This version publication date	14 November 2025
First version publication date	14 November 2025

Trial information

Trial identification

Sponsor protocol code	ITI-007-304
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Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT04959032
WHO universal trial number (UTN)	-

Notes:

Sponsors

Sponsor organisation name	Intra-Cellular Therapies, Inc.
Sponsor organisation address	135 US 202/206, Suite 6, Bedminster, NJ, United States, 07921
Public contact	ITI Clinical Trials, Intra-Cellular Therapies. Inc., +1 6464409333, ITClclinicaltrials@itci-inc.com
Scientific contact	ITI Clinical Trials, Intra-Cellular Therapies. Inc., +1 6464409333, ITClclinicaltrials@itci-inc.com

Notes:

Paediatric regulatory details

Is trial part of an agreed paediatric investigation plan (PIP)	No
Does article 45 of REGULATION (EC) No 1901/2006 apply to this trial?	No
Does article 46 of REGULATION (EC) No 1901/2006 apply to this trial?	No

Notes:

Results analysis stage

Analysis stage	Final
Date of interim/final analysis	29 October 2024
Is this the analysis of the primary completion data?	Yes
Primary completion date	07 August 2024
Global end of trial reached?	Yes
Global end of trial date	07 August 2024
Was the trial ended prematurely?	No

Notes:

General information about the trial

Main objective of the trial:

•To evaluate the efficacy and safety of lumateperone relative to placebo in the prevention of relapse of symptoms in patients with schizophrenia.

Protection of trial subjects:

The study was conducted in accordance with the ethical principles that have their origins in the Declaration of Helsinki. The study complied with the ICH Guidance on General Considerations for Clinical Trials and GCP, as well as CFR Part 312.

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	08 July 2021
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	No

Notes:

Population of trial subjects

Subjects enrolled per country

Country: Number of subjects enrolled	Poland: 24
Country: Number of subjects enrolled	Bulgaria: 115
Country: Number of subjects enrolled	Serbia: 71
Country: Number of subjects enrolled	United States: 382
Worldwide total number of subjects	592
EEA total number of subjects	139

Notes:

Subjects enrolled per age group

In utero	0
Preterm newborn - gestational age < 37 wk	0
Newborns (0-27 days)	0
Infants and toddlers (28 days-23 months)	0
Children (2-11 years)	0
Adolescents (12-17 years)	0
Adults (18-64 years)	592
From 65 to 84 years	0

85 years and over	0
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Subject disposition

Recruitment

Recruitment details: -

Pre-assignment

Screening details:

The Screening phase begins once the Informed Consent Form is signed. Patients are evaluated during the screening period lasting up to 1 week.

Pre-assignment period milestones

Number of subjects started	866 ^[1]
Number of subjects completed	592

Pre-assignment subject non-completion reasons

Reason: Number of subjects	Screen Failure: 274
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Notes:

[1] - The number of subjects reported to have started the pre-assignment period are not the same as the worldwide number enrolled in the trial. It is expected that these numbers will be the same.

Justification: Pre-assignment period includes all subjects that are screened. Worldwide number are those subjects that were enrolled into the first phase of the study (open-label treatment phase).

Period 1

Period 1 title	Open-Label Treatment Phase
Is this the baseline period?	No
Allocation method	Not applicable
Blinding used	Not blinded

Arms

Arm title	Open-Label Lumateperone 42 mg
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Arm description: -

Arm type	Open-label Run-in and Stabilization Phase
Investigational medicinal product name	Lumateperone
Investigational medicinal product code	
Other name	ITI-007
Pharmaceutical forms	Capsule
Routes of administration	Oral use

Dosage and administration details:

Lumateperone 42 mg once daily oral administration

Number of subjects in period 1	Open-Label Lumateperone 42 mg
Started	592
Completed	228
Not completed	364
Adverse event, serious fatal	1
Consent withdrawn by subject	104
inability to identify a caregiver; incarceration	2

Adverse event, non-fatal	54
Lost to follow-up	46
Lack of efficacy	122
Protocol deviation	35

Period 2

Period 2 title	Double-blind Treatment Phase
Is this the baseline period?	Yes ^[2]
Allocation method	Randomised - controlled
Blinding used	Double blind
Roles blinded	Subject, Investigator, Monitor, Data analyst, Carer, Assessor

Arms

Are arms mutually exclusive?	Yes
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Arm title	Lumateperone 42 mg
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Arm description: -

Arm type	Experimental
Investigational medicinal product name	Lumateperone
Investigational medicinal product code	
Other name	ITI-007
Pharmaceutical forms	Capsule
Routes of administration	Oral use

Dosage and administration details:

Lumateperone 42 mg once daily oral administration

Arm title	Placebo
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Arm description: -

Arm type	Placebo
Investigational medicinal product name	Placebo
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Capsule
Routes of administration	Oral use

Dosage and administration details:

Matching placebo capsule once daily oral administration

Notes:

[2] - Period 1 is not the baseline period. It is expected that period 1 will be the baseline period.

Justification: As this is a randomized withdrawal study design, subjects were required to start taking open-label study drug and meet stability criteria prior to being randomized into the double-blind treatment phase. The primary efficacy analysis is based on subjects in the double-blind treatment phase (Period 2); therefore, the baseline period is in period 2.

Number of subjects in period 2^[3][4]	Lumateperone 42 mg	Placebo
Started	110	114
Completed	94	98
Not completed	16	16
Consent withdrawn by subject	9	8
Adverse event, non-fatal	2	2
Pregnancy	-	1
Lost to follow-up	2	3
Protocol deviation	3	2

Notes:

[3] - The number of subjects reported to be in the baseline period are not the same as the worldwide number enrolled in the trial. It is expected that these numbers will be the same.

Justification: The worldwide number represents all of the subjects that were enrolled into the first phase of the study (open-label treatment phase). As this is a randomized withdrawal study design, those subjects from the open-label treatment period who met stability criteria were then randomized into the double-blind treatment phase where the baseline period is included and for which the primary analysis is based on.

[4] - The number of subjects starting the period is not consistent with the number completing the preceding period. It is expected the number of subjects starting the subsequent period will be the same as the number completing the preceding period.

Justification: 228 subjects completed the open-label treatment phase and were randomized into the double-blind treatment phase. Four subjects did not take study drug; therefore, only 224 subjects are included in the double-blind Safety/ITT population used for analysis.

Baseline characteristics

Reporting groups

Reporting group title	Lumateperone 42 mg
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Reporting group description: -

Reporting group title	Placebo
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Reporting group description: -

Reporting group values	Lumateperone 42 mg	Placebo	Total
Number of subjects	110	114	224
Age categorical Units: Subjects			
Adults (18-64 years)	110	114	224
From 65-84 years	0	0	0
Age continuous Units: years			
arithmetic mean	44.9	45.4	
standard deviation	± 9.75	± 9.74	-
Gender categorical Units: Subjects			
Female	37	44	81
Male	73	70	143

End points

End points reporting groups

Reporting group title	Open-Label Lumateperone 42 mg
Reporting group description: -	
Reporting group title	Lumateperone 42 mg
Reporting group description: -	
Reporting group title	Placebo
Reporting group description: -	
Subject analysis set title	Double-blind ITT Population
Subject analysis set type	Intention-to-treat
Subject analysis set description:	
Double-blind Intent-to Treat Population includes all patients who were randomized into the Double-blind Treatment Period (DBTP) and took at least 1 dose of randomized study drug during the DBTP.	

Primary: Time to First Symptom Relapse During the Double-blind Treatment Phase

End point title	Time to First Symptom Relapse During the Double-blind Treatment Phase
End point description:	
9999=25th percentile and its upper limit of the 95% confidence interval were not estimable due to the low number of relapse events.	
End point type	Primary
End point timeframe:	
Number of days from the randomization date to the first relapse date up to 26 weeks.	

End point values	Lumateperone 42 mg	Placebo		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	110	114		
Units: Days				
number (confidence interval 95%)	9999 (159 to 9999)	43 (30 to 71)		

Statistical analyses

Statistical analysis title	Primary Efficacy
Comparison groups	Lumateperone 42 mg v Placebo
Number of subjects included in analysis	224
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0002
Method	Logrank
Parameter estimate	Hazard ratio (HR)
Point estimate	0.37

Confidence interval	
level	95 %
sides	2-sided
lower limit	0.22
upper limit	0.65

Adverse events

Adverse events information

Timeframe for reporting adverse events:

From the time the subject gives study-specific informed consent until the end of study procedures being completed.

Assessment type	Systematic
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Dictionary used

Dictionary name	MedDRA
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Dictionary version	24.0
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Reporting groups

Reporting group title	Open-label Treatment Phase
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Reporting group description: -

Reporting group title	Double-blind Treatment Phase: Lumateperone 42 mg
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Reporting group description: -

Reporting group title	Double-blind Treatment Phase: Placebo
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Reporting group description: -

Serious adverse events	Open-label Treatment Phase	Double-blind Treatment Phase: Lumateperone 42 mg	Double-blind Treatment Phase: Placebo
Total subjects affected by serious adverse events			
subjects affected / exposed	23 / 592 (3.89%)	1 / 110 (0.91%)	7 / 114 (6.14%)
number of deaths (all causes)	1	0	0
number of deaths resulting from adverse events	1	0	0
Injury, poisoning and procedural complications			
Muscle injury			
subjects affected / exposed	0 / 592 (0.00%)	0 / 110 (0.00%)	1 / 114 (0.88%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Gastrointestinal disorders			
Intestinal obstruction			
subjects affected / exposed	1 / 592 (0.17%)	0 / 110 (0.00%)	0 / 114 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Psychiatric disorders			
Acute psychosis			
subjects affected / exposed	1 / 592 (0.17%)	0 / 110 (0.00%)	0 / 114 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0

Psychotic disorder			
subjects affected / exposed	7 / 592 (1.18%)	0 / 110 (0.00%)	0 / 114 (0.00%)
occurrences causally related to treatment / all	0 / 7	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Schizophrenia			
subjects affected / exposed	9 / 592 (1.52%)	1 / 110 (0.91%)	6 / 114 (5.26%)
occurrences causally related to treatment / all	2 / 9	0 / 1	4 / 6
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Suicidal ideation			
subjects affected / exposed	3 / 592 (0.51%)	0 / 110 (0.00%)	0 / 114 (0.00%)
occurrences causally related to treatment / all	0 / 3	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Completed suicide			
subjects affected / exposed	1 / 592 (0.17%)	0 / 110 (0.00%)	0 / 114 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 1	0 / 0	0 / 0
Renal and urinary disorders			
Acute kidney injury			
subjects affected / exposed	0 / 592 (0.00%)	0 / 110 (0.00%)	1 / 114 (0.88%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Infections and infestations			
COVID-19			
subjects affected / exposed	1 / 592 (0.17%)	0 / 110 (0.00%)	0 / 114 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0

Frequency threshold for reporting non-serious adverse events: 5 %

Non-serious adverse events	Open-label Treatment Phase	Double-blind Treatment Phase: Lumateperone 42 mg	Double-blind Treatment Phase: Placebo
Total subjects affected by non-serious adverse events			
subjects affected / exposed	85 / 592 (14.36%)	9 / 110 (8.18%)	10 / 114 (8.77%)
Nervous system disorders			

Headache subjects affected / exposed occurrences (all)	78 / 592 (13.18%) 84	9 / 110 (8.18%) 11	4 / 114 (3.51%) 4
Psychiatric disorders Schizophrenia subjects affected / exposed occurrences (all)	9 / 592 (1.52%) 10	0 / 110 (0.00%) 0	6 / 114 (5.26%) 9

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
10 March 2021	<ul style="list-style-type: none">-Corrected Inclusion Criterion 8 to reflect that PANSS positive symptom ratings were to be ≥ 4-Corrected Exclusion Criterion 24 to reflect that hemoglobin exclusion criterion was < 8 mg/dL for females and ≤ 9 mg/dL for males and ANC exclusion was < 1200 cells/μL ($1.2 \times 10^9/L$)-Clarified the list of prohibited medications-Clarified the first and third relapse criteria during the DBTP.
23 May 2022	<ul style="list-style-type: none">-Added allowance for remote study visits at all visits except for Screening (Visit 1), Baseline (Visit 2), and Randomization (Visit 14)-Clarified eligibility for the DBTP, specifying that a 20% or greater decrease from baseline in PANSS total score was to be maintained from Visit 8 [beginning of SP] through Visit 14 [end of Week 18]-Clarified content of study drug kits-Removed propoxyphene from substances listed for UDS test-Modified the primary efficacy analysis to: Remove the baseline PANSS total score from the Cox proportional hazard model and to specify the use of 3 graphical methods supportive of the Cox proportional hazards model assumption; Specify use of the Kaplan-Meier for the cumulative distribution function of time to relapse. The proportion of relapse-free patients at Week 26 would be provided using the product limit estimator, with associated CIs based on Greenwood's formula and linear transformation; Specify that the treatment difference in proportion of relapse-free patients at Week 26 and associated confidence interval would be provided.

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported