

SSC Statement on CADTH Recommendation for Vraylar (cariprazine)  
September 1, 2022

## STATEMENT FROM SCHIZOPHRENIA SOCIETY OF CANADA

### Negative CADTH Reimbursement Recommendation for Vraylar (cariprazine) is a Failure for People Living with Schizophrenia

On August 26, 2022, the Canadian Agency for Drugs and Technologies in Health (CADTH), the agency responsible for provincial reimbursement recommendations, issued a final recommendation that Vraylar (cariprazine) should not be publicly reimbursed for the treatment of schizophrenia in adults. Vraylar is the only approved treatment for schizophrenia that has also been shown to improve predominant negative symptoms and functioning, which clinical experts consulted by CADTH confirmed as an area of unmet need.

Our community views CADTH's final recommendation as a failure for those living with negative symptoms of schizophrenia and runs completely contrary to the formal input provided by the Schizophrenia Society of Canada (SSC), several other mental health organizations, and two groups of physicians. Given that one size does not fit all when it comes to treatment options for people living with the debilitating negative symptoms of the disease, CADTH's recommendation is a disservice to those struggling day-to-day with a lack of motivation, social withdrawal, difficulty in concentrating or displaying emotions, and challenges in communicating. Left untreated, these negative symptoms can lead to demoralizing social exclusion and hinder recovery and reintegration into society.

In their input to CADTH, two clinician groups "advocated for Vraylar (cariprazine) as a first-line antipsychotic for patients with schizophrenia, including those with an early phase of psychosis or negative symptoms." Notably, the final CADTH recommendation acknowledges that in clinical trials Vraylar has shown "statistically significant" improvement in patients with schizophrenia, in terms of negative symptoms and functional status. CADTH also acknowledged that "patients expressed a need for treatments which minimize the negative and cognitive symptoms of schizophrenia" and "provide an additional option for those who do not respond to existing treatments."

By all accounts, access to Vraylar would fill an expressed unmet need for people living with schizophrenia, their family members, and physicians as a therapeutic option to address negative symptoms and reliably improve psychosocial functioning to support recovery and reintegration. As such, SSC and the schizophrenia community will continue to urge all provinces to make Vraylar accessible across Canada through public funding without further delay.

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For more information, please contact:

Chris Summerville

Chief Executive Officer

Schizophrenia Society of Canada

[chris@schizophrenia.ca](mailto:chris@schizophrenia.ca)