

The Nou Barris Mental Health Centre Metabolic Syndrome (NB MetS) Protocol: Bringing Guidelines to Clinical Practice

M.F. Leticia¹, N.P. José Blas², Z.L. Antonio³, E.O. Jordi⁴

¹Department of Clinical and Health Psychology/Nou Barris Nord Mental Health Centre, Universitat Autònoma de Barcelona/Associació de Higiene Mental Nou Barris, Barcelona, Spain ; ²Department of Psychobiology and Methodology of Health Sciences, Universitat Autònoma de Barcelona, Barcelona, Spain ; ³Nou Barris Nord Mental Health Centre, Associació de Higiene Mental Nou Barris, Barcelona, Spain ; ⁴Department of Clinical and Health Psychology, Universitat Autònoma de Barcelona, Barcelona, Spain

Introduction

The importance of monitoring MetS in people with schizophrenia has been reiterated by consensus panels throughout the world. However, health screening remains limited.

Objectives

The NB MetS Protocol was developed to address the needs of this population by monitoring metabolic risk factors.

Aims

The relationship between MetS, subjective quality of life (QoL) and global functioning were examined. The MetS Protocol enabled us to participate in a group of experts in schizophrenia. This meeting resulted in a Catalan Consensus Statement.

Methods

The MetS Protocol was set up by adapting the resources of the community mental health team, without specific additional funding. For our goal, 76 patients with schizophrenia and schizoaffective disorder were interviewed to obtain sociodemographic data, lifestyle habits, psychopathology (PANSS), global functioning (GAF), subjective QoL (EQ-5D) and the anthropometric measures and blood test results. MetS was defined by the NCEP criteria.

Results

The prevalence of MetS was 36.8% and was correlated with higher body mass index (BMI), older age, inactive employment status and better self-care (due to increased awareness of self-image). Patients with MetS who engaged in physical activity reported a subjective perception of better health.

Conclusions

It is well known that there is no specific best model, but national guidance should be adapted to meet local needs. This has implications for treatment planning at the individual and organizational levels in order to improve the subjective QoL of the patients. The future plan is to develop individualized lifestyle programs for high-risk individuals identified with metabolic syndrome.