

PREDICTORS OF USE OF LONG ACTING ANTIPSYCHOTICS IN PATIENTS WITH SCHIZOPHRENIA

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Introduction: Schizophrenia is a chronic illness with a worldwide lifetime prevalence of about 1% [1]. Non-adherence and partial adherence to antipsychotic medication treatment is common and long-acting injectable “depot” preparations of antipsychotic medications have been used as an alternative to oral medication therapy for patients for whom adherence is a clinically significant problem [2].

Methods: In present study, we collected the sociodemographic and clinical data of 252 patients who were diagnosed as schizophrenia according to DSM-IV-TR and who were followed up by our outpatient clinic at least two years. The data obtained from medical records and interviews; patients were grouped according to using of long acting antipsychotics.

Results: The long acting antipsychotics were prescribed to 96 patients of 252 patients. The rates of history of suicide attempt, family history of schizophrenia and violent behaviour were significantly more in long acting antipsychotic group ($p \leq 0.05$). In regression analyze, history of suicidal and violent behaviour and family history of schizophrenia were found to be significant for predicting the use of long acting antipsychotics ($p \leq 0.05$).

Discussion: Considering the commonness of poor adherence to treatment in schizophrenia, we suggest that predicting the sociodemographical and clinical factors associated with using of long acting antipsychotics is important for treating effectively schizophrenic patients with poor treatment adherence in early stages.

References:

1. Epi Database®: Kantar Health. Available from www.epidb.com. Accessed 20 Jul 2011.
2. Schooler NR: Relapse and rehospitalization: comparing oral and depot antipsychotics. *J Clin Psychiatry* 2003, 64:14-17.3.