

P-1272 - CARDIOVASCULAR RISK IN PATIENTS WITH FIRST EPISODE OF SCHIZOPHRENIA

J.Masopust, R.Maly, C.Andrys, J.Bazant, V.Krejskova, L.Hosak

¹Dpt. of Psychiatry, ²Dpt. of Internal Medicine, ³Institute of Clinical Immunology and Allergology, University Hospital, Hradec Kralove, Czech Republic

Background: Cardiovascular illness may partly explain why patients with schizophrenia die at least 20 years earlier than general population. Monitoring and screening for cardiovascular risk factors was recently recommended in schizophrenia treatment guidelines. High-sensitivity C-reactive protein (hsCRP) is one of the inflammation mediators that has been widely used as a biomarker for predicting the occurrence of future cardiovascular (incl. thromboembolism) events in somatic medicine, but not in psychiatry.

Methods: In the prospective ANTRE (ANTipsychotics ThRombosis Embolism) study we investigated the plasma levels of hsCRP and lipids and measured weight and BMI (Body Mass Index) in a group of thirty patients (seventeen males and thirteen females) with newly diagnosed psychosis (mean age 28.2 ± 8.0 , range 18-52 years). Control group consisted of thirty-one healthy volunteers matched for age, gender and body mass index. We evaluated the haemostatic parameters at the time of admission and after three and twelve months during antipsychotic treatment.

Results: Weight (mean 67.6 versus 77.2; $P=0.00002$), BMI (median 21.6 versus 26.1; $P=0.001$), hsCRP (median 1.0 versus 2.5; $P=0.0009$), total cholesterol (4.6 versus 5.3; $P=0.016$) and atherogenicity index (2.1 versus 3.0; $P=0.016$) were significantly increased in the study group compared to controls.

Conclusions: We found increased markers of cardiovascular risk in patients with psychosis during first year of treatment. Particularly increase of hsCRP may be associated with cardiovascular events in schizophrenia patients.