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PREDICTORS FOR TREATMENT RESPONSE IN RECENTLY DIAGNOSED, ACUTELY EXACERBATED PATIENTS WITH SCHIZOPHRENIA

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**Objective:** To explore predictors for treatment response in recently diagnosed ( $\leq 5$  years), acutely exacerbated patients with schizophrenia treated with flexible doses paliperidone ER. **Methods:** Subgroup analysis of a 6-week prospective open-label study. Treatment response was defined as  $\geq 30\%$  improvement in total Positive and Negative Syndrome Scale (PANSS) and  $\geq 1$  point in Clinical Global Impression Severity Scale (CGI-S) from baseline to endpoint. High treatment response was defined as  $\geq 50\%$  improvement in total PANSS and  $\geq 2$  points in CGI-S. Early response was defined as achievement of criteria mentioned above within the first two weeks of treatment. For predictor analysis, a stepwise logistic regression model was used.

**Results:** 108 recently diagnosed patients (38.0% female, 82.4% paranoid schizophrenia) were analyzed. At endpoint, 58.9% of patients met criteria for treatment response and 26.2% met criteria for high response. The only significant predictor for treatment response was early response (Odds ratio [OR] 5.168;  $p < 0.001$ ). High treatment response was predicted by female gender (OR 5.700;  $p < 0.001$ ) and hospitalization in the previous year (OR 3.559;  $p < 0.05$ ). Use of  $\geq 1$  antipsychotic drug at the time of enrollment was predictive for not achieving high treatment response (OR 0.309;  $p < 0.05$ ). Age, body mass index and baseline total PANSS score did not predict treatment response.

**Conclusion:** As previously described in the literature, in recently diagnosed acutely ill patients with schizophrenia early response was a consistent predictor for treatment response at endpoint. High treatment response was predicted by sex, previous hospitalizations and number of antipsychotic medications at baseline.