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The differentiated medicament correction of psychoemotional infringements at the induced pregnancy

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Objectives: to prove a choice of the differentiated medicament correction of psychoemotional infringements at the induced pregnancy for complex preventive maintenance of dysadaptation mother-fetus systems.

Materials and methods: the research carried out in 2 groups - the basic group -90 patients with induced pregnancy, observed in SCOGP, the control group - 20 urban women with the spontaneously coming pregnancy in I, II, III gestational trimesters. The psycho-diagnostic testing with using of a technique of T. Nemchin, Spilberger's, modified Individual Questionnaire of Bechter's Institute and Minnesota of Multilateral Person Investigation is carried out.

Results: Among the patients with induced pregnancy two groups are selected:

- first - (57,3%) - with the moderately expressed level of psychological voltage, high jet and personal uneasiness, with sensitive type of attitude to pregnancy, the features of the person which are coming nearer a psychopathic circle;
- second - (42,7%) - with low levels of psychological voltage, average level jet and personal uneasiness, with a melancholic type of attitude to pregnancy, with astheno-neurosal person reactions.

The interrelation between features of current, outcomes of induced pregnancy and type of psychoemotional infringements are revealed, where frequency and spectrum of obstetrician pathologies at patients of second groups were authentically above ($p < 0{,}05$), than at patients of first group.

Obtained data prove application of sedative (?agne ?6) and nootrops (EGb 761) preparations for correction of psychoemotional infringements at induced pregnancy for complex preventive maintenance of dysadaptation mother-fetus systems.

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Switching to long-acting injectable risperidone: Beneficial with regard to clinical outcomes, regardless of previous conventional medication in patients with schizophrenia

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Objective: This subanalysis of the Switch to Risperidone Microspheres (StoRMi) clinical trial, an international, 6-month, open-label investigation of long-term efficacy and safety of risperidone long-acting injectable (RLAI), focuses on a subset of non-acute schizophrenic adult patients switching from oral or depot conventional antipsychotic.

Methods: Efficacy assessments included Positive and Negative Syndrome Scale (PANSS), Global Assessment of Functioning (GAF), quality of life, treatment satisfaction, hospitalization rates, and treatment-emergent adverse events (TEAEs).

Results: Patients switching from oral (n=100) or depot (n=565) conventional medication were identified. Total PANSS scores decreased by 15.3 +/- 17.5 (SD) points for patients switching from oral conventional (n=96) and 9.1 +/- 19.5 points for those switching from depot conventional medication (n=550) (P=0.0001 for both). Improvements were noted for patients switching from either oral or depot agents for PANSS subscales, GAF score, quality of life, and hospitalization. Treatment was completed by >70% of patients. About 25% of patients were satisfied with their treatment at baseline compared with about 70% at endpoint after switching to RLAI. Overall RLAI was well tolerated. The most frequent TEAEs (>5%) were: anxiety (11.0%), insomnia (9.0%), weight increase (6.0%), extrapyramidal disorder (5.0%), depression (5.0%) and disease exacerbation (5.0%) for patients switching from oral conventional, and weight increase (6.0%) and disease exacerbation (5.3%) for patients switching from depot conventional medication.

Conclusion: In this open-label study, patients with schizophrenia who were unsatisfactorily treated with oral or depot conventional antipsychotics showed improvement in symptom control, tolerability, and patient satisfaction after switching to RLAI.

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Risperidon vs haloperidol in treatment of schizophrenia

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This is a prospective study of 35 patients. The daily dosages were 2-20 mg of haloperidol and 2-8 mg of risperidonum. The scoring is according to Positive and Negative Symptoms Assessment Scoring Scale (PANSS) and to Liverpul's University Neuroleptics Side Effects Rating Scale (LUNSERS). The patients were treated in hospital and ambulatory. The patients included in the study are diagnosed with schizophrenia according the DSM- IV criteria. 23 of them are male and 12 are female, from 18-50 years old. The preliminary result of PANSS for is more than 60 points. Pregnant women or those during lactation, drug and alcohol users, patients with organic comorbidity, and those treated previously with atypical antipsychotic medications, were not included in the study.

Both medicaments are effective on improving the symptoms of schizophrenia, but a superiority of risperidonum on improving positive and negative symptoms of this syndrome, is noticed. Risperidonum is safer, since it causes less side effects (with the value of p=0.106 not statistically important) in comparison with haloperidol which causes more side effects, (with the value of p=0.001 statistically important).

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Dosing patterns in Europe: Efficacy and safety of RLAI in doses 25-50mg

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Objective: To assess the dosing patterns for risperidone long-acting injectable (RLAI) in patients with schizophrenia, participating in

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