

P03-96

ANTIPSYCHOTIC POLYTHERAPY VERSUS ANTIPSYCHOTIC MONOTHERAPY IN PATIENTS WITH SCHIZOPHRENIA AND OTHER PSYCHOSES

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Introduction: Antipsychotic therapy is the cornerstone of the treatment of psychotic disorders. Although clinical guidelines recommend the use of antipsychotics in monotherapy, the combination of two or more antipsychotics is a common habit in clinical practice, especially in cases resistant to treatment with one antipsychotic, although there are few controlled trials that support this treatment modality.

Objectives: To analyze the characteristics of antipsychotic therapy in patients admitted to hospitalization with diagnoses of schizophrenia and other psychoses, to determine if there are differences between diagnostic groups.

Material: We analyzed a sample of 241 patients admitted during 2009, 97 women and 144 men, with schizophrenia and other psychoses.

Methods: We designed a protocol of collecting data based on clinical histories of patients, reflecting the gender, age, diagnosis and treatment regimen (monotherapy or combination therapy), and performed a statistical analysis using SPSS.

Results: Of the sample, 40.2% were females and 59.8% were males. The mean age was 39.7 years old.

The diagnosis of schizophrenia was obtained in 60.2% of patients, while the remaining 39.8% were diagnosed with other psychoses (schizoaffective disorder, chronic delusional disorder, schizophreniform disorder, brief psychotic disorder, psychotic disorder not otherwise specified and other .)

The combination therapy was used in 62.2% of patients, while the remaining 37.8% were treated with monotherapy.

Conclusions: Combination therapy is used more often in male patients and in patients diagnosed with schizophrenia, while monotherapy is used more in women and patients with other psychoses.