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USE OF ANTIPSYCHOTICS IN PATIENTS WITH SCHIZOPHRENIA AND COGNITIVE IMPAIRMENT: A NATURALISTIC SURVEY ACROSS FOUR EUROPEAN COUNTRIES

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Aim: Cognitive deficits impair social and vocational rehabilitation in schizophrenic patients but little is known to which extent these symptoms are perceived by psychiatrists and how they influence antipsychotic treatment. Therefore, an online survey was performed in four European countries (Germany, Greece, Italy and Spain) .

Methods: The survey involving 744 psychiatrists and assessed demographic characteristics including vocational status, presenting symptomatology, cognitive dysfunction severity, and current antipsychotic treatment. Methodology is described in full detail by Gorwood (2010).

Results: Out of 3,996 patients, 29% were clinically assessed as having mild, 54% moderate and 17% severe cognitive dysfunction. In the mild dysfunction group, mean time since diagnosis was 9.7 years, 12.0 years in the moderate dysfunction group, and 17.0 years in the severe dysfunction group, and majority were outpatients (74.7%, 57.9% and 56.7%, respectively). The respective mean number of previous episodes was 5.1, 6.2 and 7.2 (6.0 for the total sample). Full or part time employment was reported in 32,2 %, 19.1% and 11.8% of the patients, respectively. Olanzapine was the most frequently used antipsychotic in the mild group (21.0%) and severe group (24.9%), and risperidone in the moderate group (23.0%). Ziprasidone was used in 10.2%, 0.8% and 7.1% of subjects.

Conclusion: Cognitive dysfunction is frequently perceived by psychiatrist in every day clinical practice and severely interferes with the vocational status. Major associations between specific antipsychotics and the levels of cognitive impairment were not observed.

Irrespective of the level of cognitive dysfunction, >50% of subjects were outpatients.