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NEW TREATMENT OPTION IN RESISTANT SCHIZOPHRENIA IN ADOLESCENCE -
CASE STUDY

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Early-onset schizophrenia has not only more severe course than in adults, it is also associated with poor response to antipsychotic treatment. There are only limited data about effectiveness, safety and tolerability of second generation antipsychotics (SGA) in children, but current recommendations suggest using atypical antipsychotics as the first line treatment.

Case study: 15-year-old schoolboy admitted to psychiatric hospital after acute psychotic episode . His symptoms started 2 years ago. After a few months he was diagnosed schizophrenia paranoid type. During 2 years he has been hospitalized many times because of persistent psychotic symptoms. He was treated using: risperidon, olanzapine, amisulpride, quetiapine, ziprasidone, perfenazin. All the drugs were ineffective, all were used in full doses, given no shorter than 8 weeks. Patient did not cooperate in treatment - he spits out or has hide the tablets, has to be controlled during drug supplies. He did not responded to long-acting injections of risperidon. Finally the treatment has been changed to new form of olanzapine in extended release injections started 210 mg i.m. every 14 days increased to 300 mg after 2 weeks. After 2 months of treatment (5 injections) reduction of positive and negative symptoms of schizophrenia was observed. Patients starts to socialize, attend school. He is on the drug now, the drug is well tolerated.