USE OF LONG ACTING INJECTABLES IN MENTALLY DISORDERED OFFENDERS

C. Tsopelas¹, Tzeferakos G², Kalesi G, Kotsiouba I², A. Douzenis²

1. Psychiatric Hospital of Attica, 10th-5th Psychiatric Departments, Athens, Greece.
2. 2nd Dept. of Psychiatry, National and Kapodistrian University of Athens - “Attikon” General Hospital, Athens, Greece.

Introduction

Psychiatric disorders are often associated with aggression and violence. Mentally ill patients commit criminal acts and due to insanity plea are admitted to medium or high security psychiatric wards of the Greek national Health system or are convicted and send to psychiatric hospital inside the prison. All these people have often history of poor compliance to psychiatric treatment and also history of violent behavior. After being discharged issues of poor compliance and subsequent aggression arise again. These patients have poor therapeutic outcomes, low quality of life and poor social functioning, more frequent relapses of the mental disorder and subsequently mental health services use and hospital admissions.

Aim

The present research aims to assess the long term compliance of this difficult to engage mental health patients group.

Methodology

Data collection was done during the operation of depot clinic at the Psychiatric ward of Attikon University hospital. Patients who were mentally ill suffering from serious mental psychotic disorder, with a history of poor compliance or poor response to treatment were admitted to this outpatient service which was part of an outpatient forensic mental health service. The follow up period covered 28 months (July 2013 to November 2015). Psychopathological assessment was completed using the Structured Clinical Interview for DSM-IV axis-I disorders (SCID-I/P). The statistical program SPSS was used for the data analysis.

Results

Our sample consisted of 90 patients, 60.0% were males, 40.0 % females, aged 18-65. Mean age of men was 36 (SD=13.3) and of women 43 (SD=11.5). The mean age of mental disorder onset was 31.2 years (SD=13.1). They were mostly single (75.6%). The diagnoses were: Schizophrenic spectrum disorders 63.3%, bipolar disorder 10.8%, and other (psychotic spectrum) diagnoses 20.8%. Upon admission to the study 98% had a history of poor compliance and were often involved in aggressive acts (80%) and a high percentage of them have committed criminal acts (usually murder) (67.7%).

68.9% had good compliance in the depot outpatient clinic for the period of 28 months. Although overall compliance was 68.9%, men were more compliant than women but this difference hasn’t reached statistically significant level. Upon admission atypical long acting antipsychotics were used in 91.3% of the patients and typical in 9.7% of them. In detail atypical were used as follows: 51.6 % long acting Olanzapine, 20.9 % Risperidone long acting, 17.7 % long acting Paliperidone. All other per os medication was eventually tapered off. There were no statistically significant differences between the different atypical long acting antipsychotics in compliance, average PANSS scores and akathisia. Patients receiving long acting Olanzapine had more weight increase in the first year. There were few adverse events, and only one (informal) psychiatric admission.

Conclusions

Poor compliance to treatment result to relapse of mental disorder. This is of major importance for patients who have a history of being violent were they relapse. Outpatient clinics provide a safe environment for close monitoring and enhancing good compliance. New atypical long acting antipsychotics can promote compliance, close contact with mental health services and continuous monitoring of this difficult to engage population of mentally ill patients.

References


Potential conflict of interest: NONE