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Editorial

The articles included in this supplement are derived from the presentations and discussions held during an expert meeting organized the 7th of November 2003 and supported by Lilly, France. The purpose of the meeting was to address the potential relationship between diabetes, schizophrenia and antipsychotic drugs and to provide care guidance to psychiatrists practitioners based on scientific arguments developed by the experts during the meeting.

Since this meeting took place many papers have been published on this topic providing additional information. Furthermore, the American Diabetes Association has published a consensus statement¹ reflecting a different position regarding some aspects of treatment strategy with antipsychotics.

Beyond difficulties to class antipsychotics regarding a potential risk for developing or worsening diabetes, the main objective was to highlight the needs for the patient's assessment based on clinical practice and benefit–risk ratio. Moreover, diabetes issue must recall the need to better take into account the potential somatic comorbidities in a global care strategy for schizophrenic patients.

Participant to the conference were:

Speakers: Alain Philippe (PhD), Frédéric Rouillon (MD, PhD), Thierry Bottai (MD), Frédéric Sorbara (MD), Bernard Charbonnel (MD, PhD), Franck Bellivier (MD, PhD), Philippe Raymondet (MD), Pierre Thomas (MD, PhD).

Participants: Françoise Casadebaig (PhD), Guillaume Vaiva (MD, PhD), Pierre Michel Llorca (MD, PhD), Philippe Quintin (MD), Claire Rascle (MD, PhD), Claire Gindre (MD), Jean Cano (MD), Rolland Dardennes (MD, PhD), Bernard Lachaux (MD), Myriam Rosilio (MD), Didi Roy (MD), Carmine Meglio (MD), Chartier Florence (MD), Augendre-Ferrante Béatrice (MD), Perrin Elena (MD), Ravoire Sophie (MD).

¹Consensus development conference on antipsychotics drugs and obesity and diabetes. Diabetes Care 2004;27:596–601.

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