Optimizing Treatment for Patients With Schizophrenia: Targeting Positive Outcomes

By Daniel E. Casey, MD

The introduction of clozapine in 1989 and additional atypical antipsychotics during the past decade has ushered in a new era of optimism for physicians who treat patients with schizophrenia. Unlike older agents, the atypical antipsychotics effectively treat a broad spectrum of symptoms with a reduced liability for extrapyramidal side effects. However, atypical antipsychotics differ from each other with respect to their receptor-binding profiles and their tendencies to produce side effects, such as hyperprolactinemia, weight gain, and metabolic abnormalities. Understanding the differences in mechanism, efficacy profiles, and side-effect profiles of atypical antipsychotics will enable clinicians to select the treatment regimens that best meet the needs of each individual patient.

The articles in this academic supplement cover material presented at the 156th Annual Meeting of the American Psychiatric Association, held May 17-22, in San Francisco, California.

Carol A. Tamminga, MD, begins with a review of the mechanisms of action of atypical antipsychotics and discusses differences between the neurophysiological effects of conventional antipsychotics and atypical agents.

Next, Dan L. Zimbroff, MD, describes treatment options for patients who present with acute psychotic agitation.

Herbert Y. Meltzer, MD, discusses the burden of cognitive deficits in patients with schizophrenia and the ability of atypical antipsychotics to improve cognitive function and affective symptoms.

Enrique Caballero, MD, follows with a discussion of how antipsychotic medications affect glucose metabolism.

Henry A. Nasrallah, MD, then examines tolerability issues with atypical antipsychotics.

The concluding summary, by Daniel E. Casey, MD, addresses long-term goals in antipsychotic therapy.