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COMPARISON OF INTRAMUSCULAR ZIPRASIDONE AND HALOPERIDOL FOR ACUTE PSYCHOTIC AGITATION IN AN EMERGENCY ROOM

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Objectives: To compare the efficacy and safety of the intramuscular formulations of ziprasidone and haloperidol in treating agitation in schizophrenic patients attended in an emergency room.

Method: Consecutive patients were alternatively assigned to receive 20 mg of IM ziprasidone or 10 mg of IM haloperidol. Efficacy measures were improvement in Behavioral Activity Rating Scale (BARS), in the sum of five items of the Positive and Negative Syndrome Scale that focused on agitation (PANSS-A) and scores on the Clinical Global Impression improvement scale (CGI-I), obtained 45 minutes and 2 hours after the IM medication. Tolerability assessments included changes in ECG, monitoring of vital signs and register of adverse events.

Results: Finally 18 patients (13 men, mean age 40.8 ±10.2) were included in the analysis of data. At arrival in the emergency room, there were no differences between ziprasidone (Z) and haloperidol (H) groups in age, mean QTc length, mean BARS and mean PANSS-A scores. Analyzing the global sample there was an improvement in agitation scores. No significant differences were found between the groups in change of BARS and PANSS-A scores, in CGI-I scores or in the variation of the length of QTc interval at two hours. No serious adverse events were reported.

Conclusions: In spite of the small sample size, both treatments ziprasidone IM and haloperidol IM seems to be similarly effective for the management of psychotic agitation in the emergency room. Both were well tolerated. Lengthening of QTc interval due to ziprasidone IM had not been found in our sample.

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