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CASE REPORT OF TREATMENT RESISTANT SCHIZOPHRENIA RESPONDING TO HIGH DOSE QUETIAPINE FOLLOWING CLOZAPINE WITHDRAWAL DUE TO NEUTROPENIA

P. Chandrappa<sup>1</sup>, L. Ho<sup>2</sup>

<sup>1</sup>Early Intervention Psychosis, NWMHFT, Norwich, <sup>2</sup>Fermoy Unit, Adult Psychiatry, QE Hospital, NWMHFT, Kings Lynn, UK

**Introduction:** Patients suffering from treatment-resistant schizophrenia pose a difficult therapeutic challenge. Although Clozapine is a well-established treatment in such cases, there is a significant proportion of patients who have to discontinue Clozapine due to life-threatening side-effects, despite achieving good therapeutic response. There is very limited literature on the therapeutic alternatives to Clozapine in the treatment of resistant schizophrenia.

**Objective:** To report a case of resistant schizophrenia responding to high dose Quetiapine, following discontinuation of Clozapine due to neutropenia.

**Clinical details of the case:** We are presenting a case of a forty-two year old female patient with treatment resistant schizophrenia who achieved remission following treatment with Clozapine, but had to discontinue treatment due to neutropenia, which occurred on two occasions. Clozapine discontinuation resulted in rapid and severe relapse in her condition and re-admission to hospital. Quetiapine was initiated at this stage, but only partial improvement was noted at the manufacturer's stated maximum daily dose of 800mg/day. Since the drug was being well tolerated the dose was gradually further increased.

**Results:** The dose of Quetiapine was eventually increased up to 1400mg/day, which produced significant response and the patient was discharged from hospital. Quetiapine at this dose was well tolerated with minimal side effects.

**Conclusion:** The above report indicates that high-dose Quetiapine is a viable alternative to Clozapine in treating refractory schizophrenia. The findings from this report support further investigation of this approach in the form of larger scale clinical trials.