

FORMALIZED CONSENSUS GUIDELINES FOR USE AND MANAGEMENT OF ANTIPSYCHOTIC DEPOTS

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Introduction: As part of a process to improve the quality of care, the Association for Biological Psychiatry and Neuropsychopharmacology (AFPBN) developed recommendations for the use and management of Long Acting Injectable (LAI) Antipsychotics in clinical practice.

Methods: Based on a literature review, a written survey was prepared that asked about 539 options in 32 specific clinical situations. We contacted 64 national experts, 42 (65,6%) completed the survey. According to the answers for each situation based on a 9-points scale, a categorical rank (first-line/preferred choice, second-line/alternate choice, third-line/usually inappropriate) was assigned to each option. First-line option was defined as a strategy rated as 7-9 (extremely appropriate) by at least 50% of the experts.

Results: For French experts, LAI Antipsychotics are indicated in patients with schizophrenia, schizoaffective disorder and bipolar disorder. According to their efficacy and tolerability risperidone LAI then olanzapine LAI are recommended as first line for maintenance treatment in schizophrenia, even after the first episode. Depot neuroleptics are recommended as second line for maintenance treatment in schizophrenia. LAI Second Generation Antipsychotics are recommended as second line in bipolar disorder. Several clusters of patients are identified, characterizing a specific profile for the use of LAI. Recommendations for the use of LAI and switch from oral to injectable formulations are suggested.

Conclusion: The use of LAI has advantages as maintenance treatment but their prescription rate is generally below 30% in different countries. Specific guidelines for the use and management of this formulation could improve their use in clinical practice.