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Assessment of risk factors of treatment discontinuation among patients on paliperidone palmitate and risperidone microspheres in france, germany and belgium – a retrospective database study

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Introduction: Long-acting antipsychotics (e.g. 1-monthly (PP1M) / 3-monthly (PP3M) injection forms of paliperidone palmitate) have been developed to improve treatment continuation in schizophrenia patients.
Objectives: To assess risk factors of treatment discontinuation in patients on paliperidone palmitate and risperidone microsphere. Additionally, treatment continuation between patients with PP1M and PP3M was compared.
Methods: The IQVIA Longitudinal Prescription databases were used. Risk factors of treatment discontinuation were identified by a multilevel survival regression using Cox proportional hazards model. Kaplan Meier analyses were performed by identified significant risk factors.
Results: 25,361 patients (France: 9,720; Germany: 14,461; Belgium: 1,180) were included. Over a one-year follow-up period, a significant higher treatment continuation was observed for patients newly initiated on paliperidone palmitate (46.2%) than those initiated on risperidone microspheres (14.6%). Additionally, a significantly higher treatment continuation was found for 'stable' PP3M patients (81.8%) than 'stable' PP1M patients (62.9%). Patients were more likely to discontinue when drugs prescribed by GP only (HR = 1.68, p < 0.001 vs. psychiatrist only) or being females (HR = 1.07, p < 0.001), whereas discontinuation rate decreased with age (31-50 years: HR = 0.95, p = 0.006 and > 50 years: HR = 0.91, p < 0.001 vs. 18-30 years).
Conclusions: Paliperidone palmitate was associated with a significantly higher treatment continuation than risperidone microspheres. Treatment continuation is likely to be improved by targeting young patients (18-30 years), empowering GPs with mental health knowledge and managing patients by a collaborative primary care-mental health model. Further research is needed to understand why females have more treatment discontinuation.

Disclosure: Rui Cai, Flore Decuypere and Pierre Chevalier are IQVIA employees and served as paid consultants to Janssen during the conduct of this study. Antonie Wimmer, Pascal Guillon, Stefan Pype, Annabelle Godet, Valeria Timtschenko are Janssen employees.
Keywords: antipsychotics; PP1M; PP3M; risperidone microsphere; treatment continuation

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Lep gene and leptin concentration in serum of schizophrenia patients with metabolic syndrome

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Introduction: Schizophrenia is associated with lower life expectancy due to cardiovascular disease. Metabolic syndrome (MetS) occupies an important place among the main problems. Indicators of hormones regulating metabolism may be appealing candidates as biomarkers of metabolic side-effects. Certain role belongs to genetic factors that might be the basis of sensitivity to development of MetS.
Objectives: The aim is to study polymorphisms of leptin gene (LEP) and serum leptin concentration in schizophrenia patients with metabolic syndrome.
Methods: After obtaining informed consent, patients with schizophrenia (ICD-10: F20) were included: 91 patients for biochemical research and 463 patients for genotyping. Patients were divided into two groups: 46 (119) with MetS; 45 (344) without it. Concentration of leptin was measured on an analyzer MAGPIX (Luminex, USA). Determination of 4 polymorphisms (rs2167270, rs3828942, rs10954173, rs4731426) of LEP was performed by PCR. Differences were considered significant at p<0.05.
Results: The leptin concentration is significantly (p<0.001) higher in MetS (13511.5 [7392.5; 28278.75] pg/ml) compared to patients without MetS (6662 [2131.5; 11380] pg/ml). Significant differences were found in the distribution of rs3828942 (GG:GA:AA): 25.9%:44%:30.2% in MetS and 31.2%:52.6%:16.2% without MetS (χ^2=10.545, p=0.005). The genotype AA and the allele A have a predisposing effect on the development of MetS (OR$_1$=2.247, C.I:1.248-4.046; OR$_2$=1.475, C.I:1.093-1.991, χ^2=6.49, p=0.01).
Conclusions: A number of features are observed in patients with MetS, which impair the functioning of patients. These investigations should aim to optimize the approach to assess the risk of MetS. The study was supported by grants from the RSF 19-75-10012 (genetic research) and 18-15-00011 (determination of leptin concentration)

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Keywords: schizophrénia; gene polymorphisms; Metabolic syndrome; leptin

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Conversation analysis, psychopathology and subjective experience in patients with schizophrenia

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Introduction: Patients with schizophrenia show severe difficulties in interpersonal communication, including impairments in