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ZIPRASIDONE TREATMENT EFFECTS ON LIPIDS IN PATIENTS WITH METABOLIC RISK: PRELIMINARY RESULTS

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Objective: Atypical antipsychotics have been reported to induce severe metabolic side effects such as metabolic syndrome. However, ziprasidone has a safer metabolic profile and metabolic neutral for schizophrenic patient. In this prospective 24-week study, we investigate the improvements in lipids observed in patients switched from other antipsychotics.

Methods: 150 patients with schizophrenia treated with antipsychotic who were having metabolic risk were switched to ziprasidone. They were analyzed to quantify clinically significant changes in metabolic parameters. At baseline assessment, fasting lipid profile was taken for total cholesterol, LDL cholesterol, HDL cholesterol and triglycerides. The same assessment was repeated at 4-weeks, 12-week and 24-week. Paired t-test and last observation carried forward (LOCF) were used for the statistical analysis. Preliminary results for those who completed 12 weeks follow up were presented.

Results: 13 schizophrenic patients with 7 (53.8%) male and 6 (46.2%) female have completed the 12 weeks follow up. 6 (46.25%) patients were previously treated with olanzapine, 3 (23.1%) were on risperidal, 2(15.4%) were on paliperidone, 1(7.7%) was on haloperidol and 1(7.7%) was on trifluoperazine. There was statistically significant reduction in mean total cholesterol (5.40 ± 0.73 mmol) to (4.99 ± 0.71 mmol) $p=0.007$, mean LDL cholesterol (3.51 ± 0.65 mmol) to (3.21 ± 0.65 mmol) $p=0.047$. There was no statistically significant in mean difference for HDL cholesterol and triglycerides.

Conclusion: In short-term, switching to ziprasidone treatment resulted in clinically significant improvements in cholesterol and LDL cholesterol in at-risk patients.