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COMPARATIVE RESEARCH OF POLYPHARMACY EFFICIENCY IN LONG-TIME
OUTPATIENT THERAPY OF SCHIZOPHRENIA

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Introduction: A question at issue of clinical psychiatry and psychopharmacology is efficiency of multi-class polypharmacy, adjunctive polypharmacy, augmentation and total polypharmacy in longtime treatment of schizophrenia. It is very important question of pharmacoconomisc, compliance evaluation, prevention of exacerbation with succeeding hospitalization and social impairment.

Objects: 4 casual samples of patients with the diagnosis of schizophrenia by ICD 10 (F20), undergoing treatment in out-patient conditions for 3 years. Each sample included 50 patients (25 men and 25 women).

1 sample - therapy by combinations of typical and atypical antipsychotics 2 generation,

2 sample - therapy by combinations of antipsychotics and antidepressants,

3 sample - therapy by combinations of antipsychotics and tranquilizers,

4 sample - monotherapy of typical or atypical antipsychotics.

Aims: To establish dependence of effect of therapy on aggravation (exacerbation) a schizophrenia from number and combinations of psychotropic preparations.

Methods: The clinical-psychopathological method, a comparative statistical method - processing of results was spent by means of SPSS program.

Results: As a result of research it is revealed that efficiency of therapy reliably does not differ in all 4 groups.

Conclusion: Research calls into question expediency of polypharmacy in prevention of exacerbation at a schizophrenia which, probably, is necessary to replace with dynamic monotherapy depending on a leading syndrome at exacerbation.