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PALIPERIDONE AUGMENTATION FOR REFRACTORY OBSESSIVE-COMPULSIVE DISORDER: A CASE REPORT

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Introduction: Despite the substantial clinical improvements provided by the pharmacologic and cognitive-behavior therapies of OCD, it has been estimated that 40%-60% of patients still remains refractory to conventional treatment.

Objectives: Medication augmentation can be an effective and well-tolerated short-term treatment strategy for non-responders to first-line pharmacotherapy of obsessive-compulsive disorders.

Aims: To investigate the efficacy of paliperidone as augmenting agent in the treatment of resistant OCD patient.

Methods: In the present case, we present a 6 months follow-up of an obsessive-compulsive patient treated with paliperidone ER and fluvoxamine. Paliperidone ER was started at 6 mg/day and increased up to a maximum of 12 mg/day. The clinical symptoms were measured by Y-BOCS and efficacy measures with CGI and PSP scale scores.

Results: We found that obsessive-compulsive symptoms improved after 4weeks. Patient showed a significant improvement over the 6 months follow-up for Yale-Brown Obsessive Compulsive Scale total score at week 24 as compared with baseline (from a score of 34 to a score of 12). A significant improvement in the mean PSP scale score was also seen and "much improved" on the CGI score from baseline to end point. A mean bodyweight change of ≤ 2 kg over the 24-week study period observed, but there were no clinically meaningful changes in glucose, insulin and blood lipid levels. There was no adverse event reported after the augmentation with paliperidone.

Conclusions: Adding paliperidone to SSRIs could be a valid strategy for treatment-resistant OCD patients and additional efficacy studies and randomized, double-blind studies are needed.