

Additionally, most cases of akathisia were reported as mild to moderate and rarely associated with treatment discontinuation.

## P116

Profile of the schizophrenic patient treated with aripiprazole in Spain. REA study

F. Cañas<sup>1</sup>, M. Camacho<sup>2</sup>, S. Ros<sup>3</sup>, M. Serrano<sup>4</sup>, Y. Riesgo<sup>5</sup>, J. Luque<sup>5</sup>. <sup>1</sup>*Hospital Dr. Rodríguez Lafora, Madrid, Spain* <sup>2</sup>*Hospital Virgen de la Macarena, Sevilla, Spain* <sup>3</sup>*Hospital del Mar, Barcelona, Spain* <sup>4</sup>*Hospital Juan Canalejo, La Coruña, Spain* <sup>5</sup>*Medical Department BMS, Madrid, Spain*

**Introduction:** One factor greatly influencing the prognosis and progression of the Schizophrenia is compliance and it is essential to find new drugs which carry minimal side effects.

**Objectives:** To identify the profile of patients who are treated with aAripiprazole and to assess the effectiveness, tolerability and treatment adherence.

**Patients and Methods:** This was a multicentre, observational, retrospective study with participation of 200 psychiatrists. Data from the medical records of patients treated with aAripiprazole with at least two months were collected between October and December 2005.

**Results:** A total of 997 patients were included. 95% of patients had been treated with another drug prior to receiving aAripiprazole. The pattern for switching from the previous treatment was substitution in 75% of cases and addition in 25%. Reasons for switching were: 56,6% lack of efficacy and 35,6% adverse reactions. The investigator's assessment of aAripiprazole's effectiveness and tolerability showed these was very good or good in 76% and 90% of cases respectively. Around 87.6% showed good treatment compliance. Efficacy of treatment was correlated with duration of the disease: the proportion of patients with good efficacy is greater in patients who had suffered the disease for less than ten years (78.7 vs. 73.8%) ( $p=0.01$ ).

**Conclusions:** aAripiprazole was considered to have a good effectiveness and tolerability in most patients. Effectiveness was greater in the acute phase of the disease, in patients with shorter duration of the disease and in those only taking full dose aAripiprazole

## P117

Retrospective, observational, post-authorization study to obtain a second profile of schizophrenic patients treated with aripiprazole in Spain. Study REA II

F. Cañas<sup>1</sup>, M. Camacho<sup>2</sup>, S. Ros<sup>3</sup>, M. Serrano<sup>4</sup>, Y. Riesgo<sup>5</sup>, P. Hernanz<sup>5</sup>, P. Vieitez<sup>5</sup>. <sup>1</sup>*Hospital Dr. Rodríguez Lafora, Madrid, Spain* <sup>2</sup>*Hospital Virgen de la Macarena, Sevilla, Spain* <sup>3</sup>*Hospital del Mar, Barcelona, Spain* <sup>4</sup>*Hospital Juan Canalejo, La Coruña, Spain* <sup>5</sup>*Medical Department BMS, Madrid, Spain*

**Introduction:** The conditions for the use of study medications are different in a clinical trial than when the same drugs are marketed and administered to larger population groups. This study was proposed after the recent change in the range of doses marketing of Aripiprazole in our country and following a change in the range of doses used.

**Objectives:** To identify the type of patients treated with aAripiprazole during 4 months (May 06) after the change in the SmPC (10-30 mg dose) and to establish the doses used. To identify the proportion of patients switching to aAripiprazole from previous antipsychotic treatments due to reduced efficacy or low tolerance to the previous drugs.

**Patients and Methods:** This is a retrospective, observational, multicenter study. Data will be collected from the medical records of 1000 patients treated with aAripiprazole during the four months prior to the study initiation, with a minimum of 1 month treatment. The information will be gathered by 200 psychiatrists each one providing 5 cases. Data collection was initiated in October 2006 and is expected to last two months. The sample size based on the primary objective obtained will enable a 95% confidence interval with a maximum acceptable error of 3% to estimate the proportion based on the primary objective.

**Conclusions:** The collection of data will enable us to know how psychiatrists prescribe aAripiprazole, considering the type of patient, dosage regime, switching strategy of antipsychotic treatment (by identifying the ratios of treatment switches) under standard conditions of use.

## P118

Clinical and treatment features of patients with schizophrenia in Spain: ACE 2004 study

M. Roca<sup>1</sup>, C. Leal<sup>2</sup>, E. Baca<sup>3</sup>, Y. Riesgo<sup>4</sup>. <sup>1</sup>*Department of Psychiatry, H. Joan March, Bunyola, Baleares, Spain* <sup>2</sup>*Department of Psychiatry, H. Clínico, Valencia, Spain* <sup>3</sup>*Department of Psychiatry, H. Puerta de Hierro, Madrid, Spain* <sup>4</sup>*Medical Department, Bristol-Myers Squibb, Madrid, Spain*

**Methods:** Six hundred psychiatrists from private and public Spanish clinics registered the first four patients with schizophrenia seen at their offices during 2004. Sociodemographic characteristics, diagnostic criteria, clinical features, and therapy patterns, including adherence to treatment, were recorded.

**Results:** A total of 2,154 patients were included in the study (86%  $\leq 50$  years old; 69% males; 79% unmarried), half of them had elementary school studies only while a 28% had a university degree. Male to female significant differences were observed regarding patterns of cigarette, alcohol, and illegal substance consumption. A 69% of patients had paranoid schizophrenia, 13% presented with residual schizophrenia, and the remaining 18% had other types. The paranoid and hebephrenic types were the predominant types seen in patients  $\leq 50$  years old, while residual schizophrenia was most frequently seen in patients  $> 50$ . When admitted into the study, 10% of patients were in an acute phase, 19% showed active symptoms, and the remaining 71% showed a stable disorder. Antipsychotic medications more frequently prescribed before enrolment were risperidone (29%), olanzapine (19%), and clozapine, quietapine, amisulpiride and haloperidol (7% each). The most common non-pharmacologic therapy prescribed to patients before entering the study was occupational therapy.

**Conclusions:** Patients included in this observational study were predominantly males  $< 50$  year old who presented with paranoid schizophrenia. Almost all patients had received antipsychotic medication before entering the study, mainly risperidone and olanzapine.

## P119

Correlation between cognitive functions and the PANSS cognitive factor in schizophrenic patients

R. Rodriguez-Jimenez<sup>1</sup>, I. Martinez<sup>2</sup>, M.A. Jimenez-Arriero<sup>1</sup>, G. Ponce<sup>1</sup>, A. Bagny<sup>1</sup>, M. Aragues<sup>1</sup>, A. Koeneke<sup>1</sup>, P. Carretero<sup>1</sup>, G. Rubio<sup>2</sup>, T. Palomo<sup>1</sup>, P.A.R. Group<sup>1</sup>. <sup>1</sup>*Department of Psychiatry, Hospital Universitario 12 de Octubre, Madrid, Spain* <sup>2</sup>*Mental Health Services, Retiro, Madrid, Spain*