

come in schizophrenia. A helpful approach to promote adherence in schizophrenia is the use of long-acting injectable (LAI) antipsychotics.

**Object** To evaluate:

– the global functioning and the hospitalization rate occurred in the year before and in the year following the switch from a low-efficacy oral antipsychotic to either a LAI once-monthly therapy (palmitate paliperidone or olanzapine pamoate) or the corresponding oral compound (paliperidone, risperidone or olanzapine) in schizophrenic patients;

– the treatment attitude and the insight in patients treated with second-generation antipsychotic (SGA)-LAIs and with the corresponding oral compounds.

**Method** Sixty adult schizophrenic outpatients: thirty were switched to LAIs and thirty to the corresponding oral antipsychotic. We used the following scales: Drug Attitude Inventory (DAI), Schedule for the Assessment of Insight (SAI), Life Skill Profile (LSP).

**Results** Number of hospitalizations per year decreased in both groups (LAIs: from  $1.3 \pm 0.5$  to  $0.3 \pm 0.5$ ; oral: from  $1.3 \pm 0.5$  to  $0.6 \pm 0.5$ ). We found a direct association between the “hospitalization event” and the oral drug compared to the corresponding LAI formulation ( $P=0.049$ ; OR: 3.05; 95% IC: 1.01–9.26). Patient receiving LAIs achieved a more significant improvement at the LSP score compared to the oral group ( $P < 0.001$  vs.  $P = 0.0034$ ) and higher DAI ( $5.9 \pm 4.3$  vs.  $-1.1 \pm 4.3$ ) and SAI ( $8.7 \pm 2.9$  vs.  $5.6 \pm 2.1$ ).

**Conclusions** Our data suggest that SGA-LAIs, improving the adherence to the treatment, may sensitively reduce costs in mental health services.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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#### EW0765

### Analysis of big data shows haloperidol with a decreased level of serum potassium

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**Introduction** Haloperidol has been used for the treatment of schizophrenic disorders and other disorders with psychotic symptoms in psychiatric cares. It has been reported that haloperidol can cause QT-prolongation as well as Torsades de Pointes, especially in hypokalemic condition. Here, we tested the usefulness of the large clinical electronic medical record system data from a hospital located in South Korea and further investigated any change in potassium levels before and after an exposure to haloperidol.

**Methods** The dataset used in this study is derived from open access database with information such as admission, discharge, diagnosis, prescribed drugs and selected laboratory data for the period 1 June 1994 to 31 July 2013. This database contains information of total 461,170 patients with 4,920,758 prescriptions and 3,811,812 data about serum potassium levels.

**Results** Extracting a dataset from this database to compare the levels of serum potassium before and after haloperidol usage, we selected 3661 cases of data, 2476 of them (67.6%) were males and 1185 (32.4%) were females. More than 98.5% (3606) was Asians, and mean age of the patients was  $68.63 \pm 17.3$  years old. The levels of serum potassium before and after haloperidol usage were  $4.93 \pm 2.53$  and  $3.86 \pm 0.6$  mEq/L, respectively, and *t*-tests revealed that those levels were significantly different ( $< 0.001$ ).

**Conclusions** Findings showed that an exposure to haloperidol could lead to a decrease in levels of serum potassium. We suggested

that EMR data can be a valuable tool to investigate the effects of treatment on several clinical data.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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#### EW0766

### Effectiveness and tolerance of treatment with Aripiprazole LAI in a group of schizophrenics patients

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**Introduction** In the pharmacological treatment of schizophrenia, more and more authors suggesting the use of injectable antipsychotics long-term these patients, since it increases adherence to treatment, one of the risk factors for relapse that argues most often to explain the failure of the treatment of these patients.

In the present study, it is to observe the evolution of a group of such patients to assess efficacy and tolerability of treatment with Aripiprazole LAI.

**Material and method** Data from 17 patients treated at a mental health center in Navarra (Spain), diagnosed with schizophrenic disorder, followed over a year after beginning treatment with Aripiprazole LAI are collected.

The data collected are:

- date of treatment change (month and year);
- antipsychotic previous;
- reason for change;
- aripiprazole LAI dose;
- number of income before and after the start of Aripiprazole LAI (mirror);
- effects adverse pre and post start of treatment with Aripiprazole LAI: metabolic, endocrine, extrapyramidal;
- treatment antipsychotic concomitant pre and post start Aripiprazole LAI.

**Results** The results show a decrease in the number of income after the start with Aripiprazole LAI, with very good retention of treatment, and a low number of side effects, which were mild.

**Conclusions** Treatment with Aripiprazole LAI is a good therapeutic alternative to the use of antipsychotic drugs by mouth, with good adherence, tolerability and efficacy.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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#### EW0767

### The new target therapy to prevent weight gain associated to atypical antipsychotics: PKCβ

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Antipsychotic drugs are currently used in clinical practice for a variety of mental disorders. Clozapine is the most effective medication for treatment-resistant schizophrenia, in controlling aggression