## P03-171

## METABOLIC SYNDROME IN GERMAN PATIENTS WITH SCHIZOPHRENIA - BASELINE-DATA FROM TREATMENT-NAIVE PATIENTS AND PATIENTS PREVIOUSLY TREATED WITH ANTIPSYCHOTICS

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Introduction: Several studies have already reported increased prevalence of metabolic and cardiovascular risk factors in patients on antipsychotics. This observational aimed to assess the prevalence of metabolic syndrome (MetS) in differently treated patients with schizophrenia.

**Methods:** Patients with schizophrenia (age >=18 years) from 162 psychiatric practices throughout Germany were enrolled if they were either treatment-naive and initiated on antipsychotic therapy, or had received previous antipsychotic treatment and were switched to a new medication. Baseline physical and laboratory parameters were evaluated to assess the prevalence of MetS (American Heart Association's definition). Clopper-Pearson 95%Cls were calculated. Patients were assigned to evaluation cohorts by previous treatment: olanzapine (Olz, N=62), risperidone (Risp, N=67), quetiapine (Quet, N=49), other atypical monotherapy (Atyp, N=103), typical therapy (Typ, N=90), atypical combination (Comb, N=109), treatment-naive (TN, N=162).

**Results:** The sample included 642 patients, mean age 45.2 ±13.3 years, 325 (50.6%) women. Characteristics for the TN-cohort were: mean BMI 25.3 ±4.5, mean blood triglycerides 157.3 ±122.4 mg/DL, rates of concomitant diseases (28.4%), and prevalence of MetS (24.7%, CI18.3;32.1). In comparison, previously treated patients had a mean BMI: 27.0 ±4.9 (Quet) to 29.3 ±5.4 (Comb), mean triglycerides: 182.4 ±116.9mg/DL (Risp) to 232.3 ±164.3mg/DL (Comb), concomitant diseases: 29.9% (Risp) to 41.7% (Comb), MetS: 42.4% (Risp, CI30.3-55.2) to 57.0% (Comb, CI47.1-66.5).

**Conclusion:** TN-patients (see above) had a significantly lower prevalence of MetS than the overall sample (42.8 CI 38.9;46.7). Comb-patients showed the highest prevalence of MetS. Typ-patients had a similar prevalence of MetS (43.3, CI32.9;54.2) than patients treated with atypical antipsychotics.