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TREATMENT OF PSYCHOTIC EPISODE IN EPILEPSY - OLANZAPINE VS RISPERIDONE

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Purpose: It is known that antipsychotic lower seizure threshold, cause EEG abnormalities and put the patients in the risk for additional seizures. Due to changes in organic substrate, psychosis is very common comorbidity in epilepsy. There is no consensus about treatment options. The purpose of this research was to compare effects of risperidone and olanzapine in treatment of psychotic episode in verified Grand-mall epilepsy. Treatment with bout antipsychotic was parallel.

Methods: Psychotic episode in 100 adults (67 males) with epilepsy, Grand-mall type, were measured with BPRS scale. History of diagnosis of epilepsy, Grand-mall type was verified clinically and by EEG. Subject were treated either with olanzapine (n=53) 14.7±2.4 mg per day or with risperidone (n=47) 8.6±3.8mg per day, orally.

Results: The total BPRS scores in olanzapine group at baseline, in 1st, 2nd and 3rd week were 139.6±34.2, 91.3±21.4, 81.5±19.8, and 72.3±11.1, respectively (p< 0.05). The total BPRS scores in risperidone group at baseline, in 1st, 2nd and 3rd week were 137.1±32.4, 101.6±30.9, 98.4±26.6, and 90.3±19.1, respectively (p< 0.05).

Conclusions: Results of our research showed that risperidone is more effective and comfortable drug than olanzapine in the treatment of psychotic episodes in epilepsy.