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INCIDENCE OF HYPER LIPIDEMIA WITH ATYPICAL ANTIPSYCHOTIC TREATMENT

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Background: Atypical Antipsychotics(AAPS) have been found to be effective in various psychiatric conditions however evidence of treatment emergent hyperlipidemia limit their clinical benefits.

Objective: To determine the treatment effects of AAPS onTriglyceride.
Method: Patients with schizophrenic and non-schizophrenic conditions were randomly started on AAPS. Weight, BMI, and triglycerides were measured every 3 months from base line for one year.
121 enrolled, 119 completed 1 year follow up.
Olanzapine =51 Risperidone = 59 Quetiapine = 8 Clozapine = 1
Data analysis: Descriptive and inferential analysis was carried except Clozapine to examine effects on weight, BMI and triglycerides.

Results:
WEIGHT GAIN more than 7%
Males :
Risperidone 46% > Quetiapine 33% >Olanzapine 16%
Females:
Quetiapine 40% >Olanzapine 35% >Risperidone 9%
BMI:
OBESITY:
Males:
Quetiapine 33.33% >Olanzapine 32.26%> Risperidone 16.22%
Females:
Risperidone 50%> Quetiapine 20% >Olanzapine 20%
MEAN TRIGLYCERIDES:
Male:
Risperidone 1.92> Olanzapine 1.7
Females:
Olanzapine 1.97 > Risperidone 1.78
HYPERLIPIDEMIA:
Male:
Olanzapine 54.84% >Risperidone 43.24%>Quetiapine 33.33%
Female:
Quetiapine 80% > Olanzapine 65% > Risperidone 45.45%
Higher incidence with Risperidone in 20 to 40 age group; with Olanzapine in 61 plus. Higher incidence in Schizophrenia obesity 42.42% and hyperlipidemia 37.10%.

Conclusion: Results show that AAPS do affect weight, BMI and Triglycerides in varying degree to age, gender and disease, having significant clinical implications that warrant close monitoring with ongoing education on life style, diet and exercise in a heuristic manner.

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