# Correspondence

## CTOs – use with caution

Lepping & Malik's analysis[1] of the conditions placed on patients subject to a community treatment order (CTO) in England and Wales, and suggestions for improving their robustness, is timely. We have only recently seen the results of the OCTET study published in *The Lancet*,[2] which showed that CTOs are no more effective in reducing rates of readmission to hospital than Section 17 leave. The study also found that CTOs confer no greater benefits for patients in terms of clinical or social functioning. In the authors' words, 'their current high usage should be urgently reviewed'.

There are two points made by Lepping & Malik that might be elaborated on.

The first is that CTOs 'have been very popular with treating teams and clinicians'. This suggests all psychiatrists are in favour of CTOs. In fact, the use of CTOs has varied considerably, and one consultant psychiatrist has gone on record saying: 'I have not used CTOs in my practice despite having a large community caseload, and have removed CTOs if patients are transferred to my care on them. I justify this because they lack an evidence base'.[3] We should not forget either that there have been occasions when approved mental health professionals (AMHPs) – often forgotten in this whole debate – have vetoed clinicians' applications.

Second, the authors suggest that CTOs 'have been used more than anticipated'. Certainly, their use has been higher than the Department of Health estimated at the time. However, estimates have been published by the King's Fund, based on my own analysis,[4] which suggested that in the first years of a new act, up to 5000 people would be placed under an order (pretty much reflecting the numbers today), and that the use of orders in England and Wales was likely to build over a period of some 10–15 years to between 7800 and 13 000 people in total.

It remains to be seen whether the latter estimate will be accurate. Much will depend on whether clinicians change their practice in the light of the OCTET evidence. There is certainly an urgent need for the Department of Health and the Royal College of Psychiatrists to encourage clinicians to limit CTO applications only to genuinely 'revolving door' patients with impaired decision-making (as in Scotland), a history of non-engagement followed by relapse with significant risk to self or others, and a known positive response to medication given.

Of course, in the light of both past reviews pointing to a lack of evidence that CTOs are associated with any positive outcomes,[5] and the recent OCTET findings, there is a strong argument for repealing the CTO powers completely. Whether or not there is the political will to do so is another matter.


1 Lepping P, Malik M. Community treatment orders: current practice and a framework to aid clinicians. *Psychiatrist* 2013; **37**: 54–7.

2 Burns T, Rugkåsa J, Molodynski A, Dawson J, Yeeles K, Vazquez-Montes M, et al. Community treatment orders for patients with psychosis (OCTET): a randomised controlled trial. *Lancet* 2013; **381**: 1627–33.

3 Stafford N. Doctor's orders. *Mental Health Today Magazine*, May/June 2013: 22. Pavilion Publishing.

4 Lawton-Smith S. *A Question of Numbers: The Potential Impact of Community-Based Treatment Orders in England and Wales*. King's Fund, 2005.

5 Churchill R, Owen G, Singh S, Hotopf M. *International Experiences of Using Community Treatment Orders*. Institute of Psychiatry, King's College London, 2007 (http://psychrights.org/research/Digest/OutPtCmmtmnt/UKRptonCTO.pdf). Accessed July 2013.


**Simon H. Lawton-Smith**, Head of Policy, Mental Health Foundation, UK, email: slawton-smith@mhf.org.uk

doi: 10.1192/pb.37.9.308

## Paliperidone – a costly option for schizophrenia

It appears that the authors of a recent article on paliperidone depot[1] have missed a very important aspect of the drug. The annual cost, rounded to the nearest pound, of depot fluphenazine, flupentixol, haloperidol, pipotiazine and zuclopenthixol ranges from £24 to £346, while depot risperidone costing £2072 to £3712 per year and olanzapine costing approximately £5789 are more expensive.[2] The annual cost of depot paliperidone ranges from £2207 to £4711 per annum.[2] In the current economic climate this would be a major concern. It is worth considering whether the potential benefits of paliperidone outweigh the cost implications.

The half-life of risperidone is only 3 hours and it is metabolised to paliperidone in the body. Hence, it is not surprising that paliperidone has a similar efficacy and side-effect profile to risperidone.

In terms of treatment efficacy, although there are no studies comparing the efficacy of first-generation antipsychotic (FGA) with second-generation antipsychotic (SGA) long-acting injections, the efficacy of oral SGAs is not superior to that of oral FGAs.[3] Furthermore, although not mentioned by Nussbaum & Stroup, paliperidone has been reported (and promoted) as having the advantage of administration in the deltoid muscle, as opposed to gluteal muscle alone.[4] The deltoid muscle is easily accessible and patients are generally more willing to expose their arms as opposed to other body areas. However, the deltoid muscle is smaller and deltoid intramuscular injection carries a risk of injury to the radial nerve and brachial artery. The gluteal muscle, with its larger mass, tolerates monthly injections better. Many patients do prefer gluteal over deltoid injections.[5]

One could conclude that paliperidone depot may not be superior to the currently available antipsychotic depots, but it is more expensive than all of them except olanzapine.


1 Nussbaum AM, Stroup TS. Drug information update: paliperidone palmitate for schizophrenia. *Psychiatrist* 2013; **37**: 164–6.

2 BMA, Royal Pharmaceutical Society. *British National Formulary (BNF) 65, March–September 2013*. BMJ Group & Pharmaceutical Press, 2013.

3 Kahn RS, Fleischhacker WW, Boter H, Davidson M, Vergouwe Y, Keet IPW, et al. Effectiveness of antipsychotic drugs in first-episode schizophrenia and schizophreniform disorder: an open randomised clinical trial. *Lancet* 2008; **371**: 1085–97.

4 Chue P, Chue J. A review of paliperidone palmitate. *Expert Rev Neurother* 2012; **12**: 1383–97.




https://doi.org/10.1192/pb.37.9.308a Published online by Cambridge University Press

**5** Hough D, Lindenmayer JP, Gopal S, Melkote R, Lim P, Herben V, et al. Safety and tolerability of deltoid and gluteal injections of paliperidone palmitate in schizophrenia. *Prog Neuropsychopharmacol Biol Psychiatry* 2009; **33**: 1022–31.

**Paraskevi Nikolaidou**, email: paraskevi.n@nsft.nhs.uk, and **Marinos Chatzopoulos** are core trainees, Norfolk and Suffolk NHS Foundation Trust, **Dionysis Seretis** is a research associate, the Open University, and **Albert Michael** is a consultant psychiatrist, Norfolk and Suffolk NHS Foundation Trust, Wedgwood House, Bury-St-Edmunds, UK.

doi: 10.1192/pb.37.9.308a

## All future psychiatrists should be neuropsychiatrists

Conn & Cavanna[1] discuss a meeting point for neurology and psychiatry. This is very important. My own view is that all future psychiatrists should be neuropsychiatrists. Psychological therapies should be provided by non-psychiatrists. The role of the neuropsychiatrist would be largely diagnostic and implementation of medical treatment (mainly psychopharmacology). This is the only way that makes sense of the medical degree in the first place.

New dual postgraduate training programmes in neurology and psychiatry should be instituted. The financial cost of a psychiatrist providing psychotherapy is prohibitive in the current climate.

**1** Conn R, Cavanna AE. A meeting point for neurology and psychiatry? *Psychiatrist* 2013; **37**: 147–8.

**Michael Fitzgerald**, Psychiatrist, Trinity College Dublin, Ireland, email: prof.m.fitzgerald@gmail.com

doi: 10.1192/pb.37.9.309

# Books received

**Tackling Health Anxiety: A CBT Handbook**
Helen Tyrer
RCPsych Publications, 2013, £18.00 pb, 150 pp. ISBN: 9781908020901

**Cognitive Behavioural Prevention of Suicide in Psychosis: A Treatment Manual**
Nicholas Tarrier, Patricia Gooding, Daniel Pratt, James Kelly, Yvonne Awenat & Janet Maxwell
Routledge, 2013, £27.99 pb, 264 pp. ISBN: 9780415658706

**Drugs in Psychiatry (2nd edn)**
Basant K. Puri
Oxford University Press, 2013, £29.99 pb, 240 pp. ISBN: 9780199670444

**Rating Scales in Mental Health (3rd edn)**
Martha Sajatovic & Luis F. Ramirez
Johns Hopkins University Press, 2012, £31.00 pb, 512 pp.
ISBN: 9781421406664

**The Clinical Handbook of Biofeedback: A Step-by-Step Guide for Training and Practice with Mindfulness**
Inna Z. Khazan
Wiley-Blackwell, 2013, £34.99 pb, 354 pp.
ISBN: 9781119993711

**My Nine Lives: A Psychotherapist's Journey from Victim to Survivor**
Jane Leigh
AuthorHouse, 2012, £12.95 pb, 258 pp.
ISBN: 9781477239650

**Forensic Music Therapy: A Treatment for Men and Women in Secure Hospital Settings**
Stella Compton Dickinson, Helen Odell-Miller & John Adlam (eds)
Jessica Kingsley Publishers, 2013, £24.99 pb, 256 pp.
ISBN: 9781849052528

**Psychiatry at a Glance (5th edn)**
Cornelius Katona, Claudia Cooper & Mary Robertson
Wiley-Blackwell, 2012, £23.99 pb, 128 pp. ISBN: 9780470658918

**Depression (2nd edn)**
Raymond W. Lam
Oxford University Press, 2012, £12.00 pb, 144 pp. ISBN: 9780199692736

**Clinical Psychometrics**
Per Bech
Wiley-Blackwell, 2012, £27.50 pb, 200 pp. ISBN: 9781118329788

**Depression and Anxiety in Later Life: What Everyone Needs to Know**
Mark D. Miller & Charles F. Reynolds III
Johns Hopkins Press, 2012, £10.50 pb, 224 pp. ISBN: 9781421406305

**The Therapeutic Milieu Under Fire: Security and Insecurity in Forensic Mental Health**
John Adlam, Anne Aiyebusi, Pam Kleinot, Anna Motz & Christopher Scanlon (eds)
Jessica Kingsley Publishers, 2012, £29.99 pb, 240 pp.
ISBN: 9781849052580

**Developmental Assessment of the School-Aged Child with Developmental Disabilities: A Clinician's Guide**
M. S. Thambirajah
Jessica Kingsley Publishers, 2011, £40.00 pb, 336 pp. ISBN: 9781849051811

**Managing the Side Effects of Psychotropic Medications**
Joseph F. Goldberg & Carrie L. Ernst
American Psychiatric Publishing, 2012, £43.00 pb, 532 pp.
ISBN: 9781585624027

**Intersectionality, Sexuality and Psychological Therapies: Working with Lesbian, Gay and Bisexual Diversity**
Roshan das Nair & Catherine Butler (eds)
Wiley-Blackwell, 2012, £34.99 pb, 298 pp. ISBN: 9780470974995

**The Art and Science of Brief Psychotherapies: An Illustrated Guide (2nd edn)**
Mantosh J. Dewan, Brett N. Steenbarger & Roger P. Greenberg (eds)
American Psychiatric Publishing, 2012, £52.00 pb, 372 pp.
ISBN: 9781585623969

**Clinician's Handbook for Obsessive Compulsive Disorder: Inference-Based Therapy**
Kieron O'Connor & Frederick Aardema
Wiley-Blackwell, 2011, £29.99 pb, 352 pp. ISBN: 9780470684108

**Clinical Manual for Treatment of Schizophrenia**
John Lauriello & Stefano Pallanti (eds)
American Psychiatric Publishing, 2012, £52.00 pb, 523 pp.
ISBN: 9781585623945

**From the Couch to the Lab: Trends in Psychodynamic Neuroscience**
Aikaterini Fotopoulou, Donald Pfaff & Martin A. Conway (eds)
Oxford University Press, 2012, £55.00 hb, 506 pp. ISBN: 9780199600526

**Clinical Manual of Alzheimer Disease and Other Dementias**
Myron F. Weiner & Anne M. Lipton (eds)
American Psychiatric Publishing, 2012, £46.00 pb, 470 pp.
ISBN: 9781585624225

**Textbook of Psychoanalysis (2nd edn)**
Glen O. Gabbard, Bonnie E. Litowitz & Paul Williams (eds)
American Psychiatric Publishing, 2012, £82.00 hb, 636 pp.
ISBN: 9781585624102

**Cognitive Therapy for Addiction: Motivation and Change**
Frank Ryan
Wiley-Blackwell, 2013, £32.99 pb, 230 pp.
ISBN: 9780470669952

**Relational Suicide Assessment: Risks, Resources, & Possibilities for Safety**
Douglas Flemons & Leonard M. Gralnik
W. W. Norton & Company, 2013, £25.00 hb, 272 pp.
ISBN: 9780393706529

**The Intelligent Clinician's Guide to the DSM-5**
Joel Paris
Oxford University Press, 2013, £18.99 pb, 288 pp.
ISBN: 9780199738175

**Suicide Prevention (2nd edn)**
Robert D. Goldney (ed.)
Oxford University Press, 2013, £19.99 pb, 120 pp.
ISBN: 9780199677580

doi: 10.1192/pb.bp.113.044834



https://doi.org/10.1192/pb.37.9.308a Published online by Cambridge University Press