

P03-277 - THE EMEA ADHES SURVEY IN SCHIZOPHRENIA: PSYCHIATRISTS' PERCEPTIONS OF THE EXTENT OF ASSESSMENT AND MANAGEMENT OF PARTIAL AND NON-ADHERENCE TO MEDICATION

D. Naber¹, K. Alptekin², J.M. Azorin³, F. Cañas⁴, V. Dubois⁵, R. Emsley⁶, P. Haddad⁷, P. Gorwood⁸, J.M. Olivares⁹, G. Papageorgiou¹⁰, M. Roca¹¹, P. Thomas¹², L. Martinez¹³, A. Schreiner¹⁴

¹Universitätsklinikum Hamburg-Eppendorf, Klinik für Psychiatrie und Psychotherapie, Hamburg, Germany, ²Department of Psychiatry, Dokuz Eylül University School of Medicine, Izmir, Turkey, ³Department of Psychiatry, Sainte Marguerite Hospital, Marseille, France, ⁴Department of Psychiatry, Hospital Dr. R. Lafora, Madrid, Spain, ⁵Cliniques Universitaires St-Luc, Bruxelles, Belgium, ⁶Department of Psychiatry, Faculty of Health Sciences, University of Stellenbosch, Cape Town, South Africa, ⁷Salford and Trafford Mental Health NHS Trust and Department of Psychiatry, University of Manchester, Manchester, UK, ⁸CMME. Hospital Sainte-Anne (Paris-Descartes), Paris, France, ⁹Department of Psychiatry, Hospital Meixoeiro, Complejo Universitario de Vigo, Vigo, Spain, ¹⁰Department of Psychiatry, Evangelismos General Hospital, Athens, Greece, ¹¹Unidad de Psiquiatría, Hospital Juan March, Institut Universitari d'Investigació en Ciència de la Salut (IUNICS) Universitat de les Illes Balears, Palma de Mallorca, Spain, ¹²Department of Psychiatry, Fontan Hospital CHRU Lille, University of Lille, Lille, France, ¹³Medical Affairs, Janssen, Madrid, Spain, ¹⁴Medical Affairs, Janssen, Neuss, Germany

Introduction: Partial or non-adherence to medication is high amongst patients with schizophrenia. Rates of non-adherence of up to 72% have been reported depending on the method used and the patient population. Adherence is essential for optimal long-term patient outcomes in schizophrenia and failure to adhere to medication can have a major impact on the course of illness and treatment outcomes.

Objectives: The objective of the EMEA (Europe, Middle east and Africa) ADHES survey was to collect psychiatrist's perceptions of the assessment, reasons and management of partial and non-adherence to medication.

Aims: The aim of this poster is to present psychiatrist's perceptions collected in the EMEA ADHES survey.

Methods: The survey was devised to ascertain psychiatrists' preferred methods of assessing adherence, their perceptions of the level of adherence, reasons for non-adherence and on strategies to improve adherence.

Results: Psychiatrists estimated that during the previous month more than half of their patients (53%) were partially or non-adherent. They estimated that as few as a third of patients who deteriorated after stopping medication was able to attribute this to their non-adherence. 76% of psychiatrists assessed adherence most frequently by asking their patient explicitly. Use of long-acting treatment was the preferred choice to address adherence problems for 62% of respondents.

Discussion: This EMEA-wide survey illustrates that while respondents recognised the relevance and importance of partial and non-adherence to medication, there remains a need for more proactive management of treatment adherence of patients with schizophrenia to reduce the frequency and consequences of relapse.