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FUNCTIONAL OUTCOME IN FIRST-EPISODE-SCHIZOPHRENIA RECEIVING ASSURED ANTIPSYCHOTIC MEDICATION: 52-WEEK PROSPECTIVE STUDY WITH RISPERIDONE LONG-ACTING INJECTION

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Introduction: It is well stablished that therapeutic compliance is a fundamental predictive factor in the outcome of first-episode psychosis. Risperidone long-acting injection has demonstrated high remission rates and improvements in treatment adherence. Objective:

1- To analyse the efficacy of risperidone long-acting injection vs oral atypical antipsychotics in first-episode psychosis.

2- To describe in both groups the evolution of clinical and cognitive symptoms, functional outcome, quality of life, insight and treatment adherence.

Method: 18 patients with a first-episode psychosis treated with long-acting risperidone were compared with 21 first-episode psychosis treated with oral atypical antipsychotic medication

. They were matched one on one for age, gender and years of education. All subjects were compared regarding psychopathology and functional outcome terms. Patients were examined with Positive and Negative Syndrome Scale (PANSS) for clinical symptoms. Longitudinal functionality was prospectively assessed with the Clinical Global Impression (CGI) and Global Assessment of Functioning (GAF) rating scales.

Results: We found significant differences between both groups in negative symptom severity and global assessment of functioning. There was no statistically significant difference between the two groups in PANSS positive and general components. Negative symptom severity was associated with poorer GAF ratings.

Conclusions: Our data suggest that risperidone long-acting injection assures treatment compliance and therefore could improve clinical and functional outcome.