TOLERABILITY OF OUTPATIENT ANTIPSYCHOTIC TREATMENT: 36-MONTH RESULTS FROM THE EUROPEAN SCHIZOPHRENIA OUTPATIENTS HEALTH OUTCOMES (SOHO) STUDY

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Objective: To report on the tolerability profiles of olanzapine, risperidone, quetiapine, amisulpride, clozapine, oral typical and depot typical antipsychotic medications in outpatients with schizophrenia during 36 months of treatment.
Methods: SOHO is a 3-year, prospective, observational study of the outpatient treatment of schizophrenia. Ten thousand patients initiating an antipsychotic medication for schizophrenia were included and followed for three years regardless of medication changes. Cohorts of patients were defined based on the antipsychotic they started at the baseline visit. Patients taking more than one antipsychotic (combination therapy) were excluded from these analyses. The rate of Extrapyramidal Symptoms (EPS), loss of libido, impotence, amenorrhea, galactorhea, gynecomastia and weight gain were assessed in the 4939 outpatients who were evaluated at all time points.. This analysis was performed with all patients that were classified depending on the medication started at the baseline visit, regardless of that medication being maintained during the 3-year follow-up. Sensitivity analyses: A logistic regression model was used to relate the medication patients were taking upon presentation at the visit, with the side effects patients presented at the same visit, adjusting by baseline differences among cohorts. In addition, a sensitivity analysis was conducted with those patients who maintained the antipsychotic initiated at baseline during the three years (completers).
Results: A higher proportion of patients in the oral (16.15%) [Completers OR: 3.65; 95% CI: 2.35-5.67)] and depot conventional antipsychotics (29.41%) [6.94; 4.52-10.65], risperidone (17.28%) [3.04; 2.37-3.89], experienced more EPS than patients in the other cohorts. Patients treated with olanzapine (30.73%) were less likely to have loss of libido/impotence compared to patients taking risperidone: (39.02%) [1.50; 1.22-1.84], oral typical: (42.75%) [2.17; 1.51-3.10]; depot typical: (40.34%) [1.55; 1.04-2.30]. Increases in weight occurred in all cohorts; quetiapine: +1.73kg, amisulpride: +1.49kg, oral typical: +2.19kg, clozapine: +2.95kg, but were greater in the olanzapine (4.20kg), depot typical (+3.43kg) and risperidone: (+.3.05kg) cohorts.
Conclusions: Antipsychotics clearly have different tolerability profiles. Results should be interpreted conservatively due to the observational study design.