TREATMENT WITH ANTIPSYCHOTICS IN VARIOUS PSYCHIATRIC SETTINGS IN AZERBAIJAN

Jamila ISMAYILOVA¹, Leyla MANSUROVA²

¹The National Mental Health Center

²Azerbaijan Medical University

Introduction:

Although there are 144 brand-name and generic antipsychotics registered in Azerbaijan their prescription varies considerably from one mental health facility to another. These variations may be related to multiple factors such as local prescribing traditions, pharmaco-economic issues, availability of a certain drug, governmental policies and regulations, etc.[1][2] At the same time the preferences in antipsychotic prescription by psychiatrists have never been studied in our country.

Objectives: The study purpose is to identify antipsychotic prescription patterns in psychiatrists to their employment either in out-patient or in-patient services. Also the factors influencing the preferences in favor of traditional neuroleptics or second generation drugs are considered.

Methods: A cross-sectional survey among 39 psychiatrists (11 from outpatient service and 28 from inpatient services) was carried out in the course of this study. Each study participant was asked to complete a standard questionnaire to report their estimation of a certain antipsychotic drug. The criteria for estimation were based on perceived efficacy, availability, safety, side effects and time of response. Each criterion was estimated on 5 point scale where maximal score indicated most satisfaction with drug.

The data were analyzed using SPSS-17. Descriptive statistics and non-parametric tests (Mann-Whitney) was used to test differences between two groups (psychiatrists working in-patient and out-patient services) Results were considered significant if p-value <0.05

Results: The highest score was given to risperidone which seems to be the most frequently prescribed antipsychotic in both in-patient and out-patient settings. At the same time psychiatrists working in in-patient services were prone to assign higher score to the first generation neuroleptics, while their colleagues employed in out-patient facilities provided higher scores to the second generation antipsychotics. For instance, mean scores for aripiprazole given by out-patient psychiatrists were as much as twice greater than the scores given by doctors employed in psychiatric hospitals ($p < 0.001$). The similar statistically significant difference was observed for quetiapine ($p < 0.001$). Psychiatrists working with in-patients justified the choice of old generation antipsychotics by more rapid treatment effect which is important for managing acute symptoms they see often in their practice. At the same time patients with mental disabilities with long-term hospitalizations have used to be treated with traditional neuroleptics.

Significant correlation between years experience and estimation of certain drugs was not found.

Conclusion: Despite that the modern guidelines recommend wide use of atypical antipsychotics as more safe and more tolerable these recommendations are not always followed in in-patient practice. Therefore more training activities focusing on psychopharmacotherapy should be given for psychiatrists working in the hospitals. In addition requirement for prescribing modern antipsychotics should be included in relevant policies as well as monitoring and quality assurance measures should be provided by health authorities.

[1] A. Fourrier, I. Gasquet, M. P. Allicar, B. Myriam, J. P. L??pine, and B. B??gaud, "Patterns of neuroleptic drug prescription: A national cross-sectional survey of a random sample of French psychiatrists," Br. J. Clin. Pharmacol., vol. 49, no. 1, pp. 80–86, 2000.

[2] D. Zullino et al., "Prescribing practices in German and Swiss psychiatric university and in non-university hospitals: national differences.," Int. J. Clin. Pharmacol. Ther., vol. 43, no. 7, pp. 339–49, 2005.