

## **Longitudinal observation of antipsychotic prescribing in female patients admitted into a female PICU**

Haque, M.N, Whiskey, E and Sethi, F

It is widely known that compliance with antipsychotic medication is poor. In general patients on antipsychotics and mood stabilizers tend to discontinue medication despite their effectiveness (Mitchell and Selmes, 2007). In accordance with the NICE guidelines the healthcare professional should consider the choice of antipsychotic medication together with the service user (NICE, 2014). Despite this regulation it may be difficult to follow and maintain this in a Psychiatric intensive care unit (PICU) setting. This may have implications for long-term adherence. The aim of this preliminary study is to retrospectively examine patterns of antipsychotic prescribing in a female PICU. A total of 10 ex-PICU female patients with psychosis related disorders were followed up longitudinally to examine continuation of medications they were prescribed during PICU at both 6 and 12 months after discharge. A secondary outcome was to determine the proportion of patients who were discharged from hospital at 6 and 12 months post PICU. It is hypothesized that patients who continue with the same pharmacological interventions prescribed on discharge from PICU at 6 and 12 months post discharge, are more likely to be outpatients. Results indicated that 8 out of 10 patients continued with the same medications at both 6 and 12 months after PICU discharge. 7 out of the 8 females who are presently outpatients switched status by 6 months after PICU discharge whilst one remained an inpatient even after 12 months. The findings suggest that although doctors may not always be able to discuss the choice of antipsychotic medication with their patients due to the severity of their condition, the majority of ex-PICU patients nonetheless continued to take the same medications at both 6 and 12 months after discharge. Although it is clear that the consensus of the patient may not always be essential for long term antipsychotic adherence, due to the small sample size it is not possible to draw firm conclusions. Thus a larger and longer naturalistic follow up of patients discharged from PICU is needed to identify positive and negative prognostic factors.

### **References**

Mitchell, A. J., & Selmes, T. (2007). Why don't patients take their medicine? Reasons and solutions in psychiatry. *Advances in Psychiatric Treatment*,13(5), 336-346.

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