



Long Term Management And Relapse Prevention In Schizophrenia

April 25th 2014 - Hindusthan International, Kolkata



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Long Term Management And Relapse Prevention In Schizophrenia conference was an initiative by Asian Society of Continuing Medical Education. The CME was designed to get the renowned psychiatrists on one platform for exchanging their views and sharing their clinical experiences with each other about the challenges in treating Schizophrenia. Well known Psychiatrists from East India were invited to share their knowledge and Experience.

Date: 25th April 2014

Place and Venue: Hindusthan International, A 235/AJC Bose Road, Kolkata.

Total Participants: 71

CHAIRPERSON:



Prof (Dr) Uday Chaudhuri
MD, DPM, DNB

Speakers :



Prof (Dr) R. Raguram
M.B.B.S,DPM,MD,

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Dr. G. Prasad Rao
M.D. D.P.M.



Dr. Venu Gopal Jhanwar
MBBS, MD

Panelists:



Dr. Pradip Kumar Saha
M.B.B.S, MD



Dr. Debashis Ray
M.B.B.S, DPM, MS

Topics:

Patients, Pills and Problems: Perspective on Medicine adherence in schizophrenia.

Relapse prevention in schizophrenia-Evidence based approach”

Why and how to start long acting injections

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Panel discussion:

Experience sharing forum: Managing relapse in clinical practice

Question and answers- Voting by participants

Prof (Dr) Uday Chaudhuri opened the session with introductory address. He told the audience about “**beyond Symptom control- Recovery and reintegration in schizophrenia**”. He dwelt on Journey of recovery, Recovery model, Recovery process and the Factors linked to recovery.

Prof (Dr) **Raguram talked on Patients, Pills and Problems: Perspective on Medicine adherence in schizophrenia**. The mainstay of his talks was “**From Compliance to adherence**”. He said non adherence is not illness specific. Non Adherence Is Associated With-

- ◆ Severity Of Symptoms
- ◆ Paranoid & Grandiose Delusions
- ◆ Negative Symptoms
- ◆ Cognitive Deficits
- ◆ Co-morbidity: Depression& Substance Abuse
- ◆ Poor Insight: Most Studied, Strong Correlation

Ways of facilitating adherence:

Establish a supportive, trusting relationship with the patient ;Involve the patient in the decision-making process; Assess the patient's understanding of the illness and treatment; Clearly communicate the benefits of treatment; Encourage the patient in setting treatment goals; Assess the patient's readiness to carry out the treatment plan; Identify any barriers to adherence the patient may have; Formulate strategies for overcoming them with the patient; Tailor medication regimens to the patient's daily routine; Reduce complexity of medication regimen; Reward adherence.

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Dr. G. Prasad Rao gave the key note address on “**Relapse prevention in schizophrenia-Evidence based approach**”.

He said-early proper treatment in schizophrenia to prevent every single episode of relapse is critical. Data suggest that during the 1st year of illness the largest decline of cerebral (gray matter) volume takes place .There is a

high rate of relapse within 5 years after a first episode. Relapse prevention strategies should ensure periods of non-adherence to medication are minimized. **Depot offers 30% relative risk reduction in Relapse compared to oral antipsychotics.** Significantly fewer participants in the depot than in the oral group relapsed.

Long-acting injectable SGAs ensure continuous drug delivery, transparency of non-adherence, allow missed medication to be monitored, and addressed stability of plasma drug concentration beneficial for efficacy and side-effect profile

About the benefits with **Paliperidone Palmitate** he said-There is improved medication adherence and relapse rates as compared with oral risperidone; frontal lobe white matter volume was stable in patients treated with RLAI but decreased in patients treated with oral risperidone. He has more than 1 year experience with **Injectable Paliperidone Palmitate**. He said it has definitely better acceptability-almost 90% of those who were started on it are continuing.

- ♦ Side effects : in terms of EPS are much less
- ♦ No Parkinsonism symptoms.
- ♦ Akathisia is also much less. He concluded in the end that-
- ♦ Relapses and chronicity are the characteristic features of schizophrenia.
- ♦ Patients have to be on maintenance & Continuous treatment.

Compliance is a major issue with oral antipsychotics.

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Depot preparations need to be preferred in Pts with compliance issues.

Dr.Venu Gopal Jhanwar talked on Why and how to start long acting injections. The summary of his talk was:

- ♦ Even small medication gaps can lead to significant problems
- ♦ Clinicians are not good at assessing adherence to oral antipsychotic medication, whereas accuracy is much better with LAI
- ♦ In general, the route of medication is not a major determinant of adherence attitude
- ♦ For patients with schizophrenia, non-adherence can be intentional [“WILL NOT” take medication] or unintentional [“CANNOT” take oral medication]
- ♦ LAI can be an adherence tracking intervention, especially for patients who WILL NOT take medication down the road
- ♦ LAI can be a direct adherence intervention, especially for patients who CANNOT take their oral antipsychotic consistently

Prof (Dr) Uday Chaudhuri summed up the Relapse Prevention in Schizophrenia management.

The last session at the CMEs was the game Based approach towards a better understanding of the subject. In this total 9 questions were flashed on the screen one by one. They all had 4 or 5 options. The digital answering pads were given to the delegates. The delegates were given 10 seconds to answer each question. After ten seconds the answers were flashed on the screen which were eventually explained by the Faculties, panelists and the chairpersons.

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Dr. G Prasad Rao conducted the session involving the panelist **Dr. Pradip Kumar Saha** and **Dr. Debashis Ray**. Both the panelists shared their clinical experiences about managing relapse prevention in schizophrenia

This turned out to be the most engrossing and interactive session.

Feedback by the Participants:

Would like to have more CMEs on-

- ♦ Schizo-obsessive disorder
- ♦ Psychotherapy, Recent Advances
- ♦ MDD
- ♦ Child Psychiatry, Neurotic and Stress-related disorders and Geriatric Psychiatry
- ♦ Topics About mood disorder
- ♦ Psychosexual disorder
- ♦ OCD
- ♦ ADHD
- ♦ Childhood Development Disorder
- ♦ Duration of treatment in case of any psychiatric Illness
- ♦ Duration of treatment
- ♦ Relapse prevention in Mood disorder.
- ♦ Neurobiology of Psychiatry Disorder
- ♦ Rehabilitation of Schizophrenia patient
- ♦ Bipolar Disorder
- ♦ Schizophrenia with co-morbid condition
- ♦ Psychosexual disorders.
- ♦ Rehabilitation of patients suffering from dementia.
- ♦ Suicidal Prevention.
- ♦ Bipolar Mood Disorder

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- ◆ Evidence of Brain damage in patients who have episodic illness on regular medications V/S those not on regular medicines.
- ◆ Treatment resistant Schizophrenia.
- ◆ Treatment resistant Depression
- ◆ Endophenotype and Relapse prevention in Schizophrenia
- ◆ Functional recovery- Is it a dream or reality?

Comments:

- ◆ It should be more interactive
- ◆ Excellent
- ◆ Should be having two speakers (3 is too much)
- ◆ Good discussion.
- ◆ Well organized

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Photos of the event



Registration desk



Asian Introduction



Prof (Dr) Raguram



Prof (Dr) Uday Chaudhuri

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Dr. G Prasad Rao



Dr. Venu Gopal Jhanwar



Chairperson & panelist expressing



Audience interacting