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ADHERENCE WITH ANTIPSYCHOTIC TREATMENT MEDICATION IN OUTPATIENTS WITH SCHIZOPHRENIA: 36- MONTH RESULTS FROM THE SCHIZOPHRENIA OUTPATIENTS HEALTH OUTCOMES (SOHO) STUDY

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Objective: To assess frequency and baseline factors associated with adherence with antipsychotic medication during long-term treatment in outpatients with schizophrenia.

Methods: SOHO is a 3-year, prospective, observational study that included 10 972 patients changing or starting a new antipsychotic medication. Treatment adherence during 4 weeks prior to the visit was assessed at each visit by participating psychiatrists as:

- the patient has not been prescribed medication;
- the patient almost always adheres;
- the patient adheres half of the time; and
- the patient never adheres to antipsychotic medication.

Logistic regression models were fitted to analyze the baseline factors associated to compliance during follow-up.

Results: 6731 patients with at most one missing visit were analysed. Data from the missing visit were imputed from the previous visit; 71.2% were considered to be adherent and 28.8% non-adherent over the 3-year follow-up period. The strongest predictor of medication adherence during follow-up was adherence at baseline (OR = 4.01, 95% CI: 3.46-4.64). Other baseline predictors of adherence included not using antipsychotics in the previous 4 weeks, receiving treatment for first time, being socially active, and a higher body mass index. Baseline predictors of non-adherence were alcohol dependence, substance abuse, hospitalisation in previous 6 months, living independently housing and having hostile behaviours.

Conclusions: Alcohol dependence, substance abuse and living independently were associated with non-adherence. Previous adherence, being socially active and receiving medication for the first time was associated with better adherence. Limitation: medication adherence was assessed by the psychiatrist through a single item question.