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QUALITY: A NON-INTERVENTIONAL STUDY EVALUATING QUALITY OF LIFE IN SCHIZOPHRENIC PATIENTS TREATED WITH ATYPICAL ANTIPSYCHOTICS IN THE AMBULATORY SETTING

J. Peuskens¹, E. Fontaine², T. Vanlerberghe²

¹University Psychiatric Centre, Catholic University Leuven, Kortenberg, ²AstraZeneca, Brussel, Belgium

Objectives: The QUALITY study evaluated Quality-of-Life in schizophrenic patients treated with atypical antipsychotics (AAPs) in the ambulatory setting.

Methods: This study was a 9-month, observational, multicentre prospective study. Patients (18-65 years-old) diagnosed with schizophrenia and treatment started with one AAP before visit-1 (minimum: 4-weeks, maximum: 8-weeks) were enrolled into this Belgian study. At visit-1 patients' demographics and medical history were recorded with follow-up visits after 3-, 6- and 9-months. At each visit, patients completed the Subjective Well-being under Neuroleptic treatment short form (SWN-K), while investigators assessed the Positive and Negative Symptom Scale (PANSS-8) and Global Assessment of Functioning.

Results: 121 patients were enrolled: 91 male, mean age 36.7±10.8years. The main AAPs were risperidone (38/121), aripiprazole (28/121) and quetiapine (25/121). On average, most mean changes from baseline in SWN-K-subscale scores were positive (between -0.5 and +0.5, range -1.8-1.6) suggesting patients felt better, although there were no treatment-group differences. The associations between baseline SWN-K-subscales and age were small (RC [regression co-efficient] range: -0.03-0.01). PANSS-8-score changes were slightly negative (means between -0.77 and -0.43) suggesting decreased symptom severity. Patients with more severe negative symptoms considered their mental- and physical-functioning to be better throughout the study, indicated by significant correlations between these SWN-K-subscale scores and negative PANSS-scores (RC=0.19, p=0.0282; RC=0.15, p=0.0258). The associations between SWN-K-scores and positive PANSS-scores were small (RC: 0.01-0.14). The number of hospitalizations decreased during the study (9.6% between visit-1 and 2 vs. 7.5% visit-3 and -4).

Conclusions: Quality-of-life for all patients seemed to improve slightly, without any differences between treatment-groups.