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ACETYLCHOLINESTERASE INHIBITORS FOR SCHIZOPHRENIA

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Introduction: As evidenced by ongoing research and partial effectiveness of the antipsychotics on cognitive and negative symptoms, the search is on for drugs that may improve these domains of functioning for someone suffering from schizophrenia.

Objectives: To do a systematic review to find out if acetylcholinesterase inhibitors could be used for schizophrenia considering their use in dementia for cognitive symptoms.

Aim: The aim of review was to determine the clinical effects, safety and cost effectiveness of acetylcholinesterase inhibitors for treating patients with schizophrenia.

Methods: We searched the Cochrane Schizophrenia Group's Register and references of all identified studies were inspected. We included all clinical randomised trials comparing acetylcholinesterase inhibitors with antipsychotics or placebo either alone or in combination for schizophrenia and schizophrenia-like psychoses. For dichotomous data we calculated relative risks (RR) and their 95% confidence intervals (CI) on an intention-to-treat basis based on a random-effects model. For continuous data, we calculated weighted mean differences (WMD) again using random-effects model.

Results: The acetylcholinesterase inhibitor plus antipsychotic showed benefit over antipsychotic and placebo in the mental state, cognitive domain and tolerability. No difference was noted between the two arms in other outcomes. The overall rate of participants leaving studies early was low and showed no clear difference between the two groups.

Conclusions: The results seem to favour the use of acetylcholinesterase inhibitors in combination with antipsychotics in different outcomes, but because of the various limitations, this review highlights the need for large, independent, well designed, conducted and reported pragmatic randomised studies.