

P-1306 - IMPROVEMENT ON CLOZAPINE AND VALPROATE THERAPY AMONG MALE SCHIZOPHRENIC PATIENTS

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Introduction: Clozapine is indicated for the treatment of refractory schizophrenia.

Objectives: Aim of the study was to investigate improvement among schizophrenic male patients after augmentation on clozapine with valproate.

Method: Study group consisted of 24 male, aged 19 to 46 years inpatients and outpatients diagnosed with schizophrenia (DSM-IV criteria) and who had received a single antipsychotic clozapine for at least 4 weeks and with total score of at least 45 on the BPRS. Because no responsive or only partially responsive to clozapine, patients were treated with combination therapy clozapine and valproate. The Brief Psychiatric Rating Scale (BPRS), among others: SANS, ASEX, subscale on sexual function of the UKU Side Effects Rating Scale, were administered in at two-week intervals for 8 weeks.

Study exclusion criteria: somatic conditions, Depressive/ subdepressive symptoms, substance abuse; patients did not take medications to improve erectile dysfunction or other medications unless prescribed antipsychotic.

Results: Mean BPRS total and positive symptom subscale scores decreased significantly from baseline to week 4 and week 8 in BPRS total score on to baseline, as were reductions in SANS scores. After 2 weeks on combination therapy clozapine and valproate, ASEX scores were decreased. ($p=0,01$).

In patients under clozapine therapy, orgasmic, ejaculatory and erectile dysfunction is more common compared with combination therapy clozapine and valproate after 4 weeks ($p<0,05$).

Conclusions: In patients with a suboptimal response to clozapine, the addition of valproate improved overall and positive symptoms of schizophrenia and may provide additional benefit in sexual dysfunction.