W01-03

A SYSTEMATIC EVALUATION AND COMPARISON OF THE GUIDELINES FOR SCREENING AND MONITORING OF CARDIOMETABOLIC RISK IN PEOPLE WITH SCHIZOPHRENIA

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Metabolic and cardiovascular health problems have become a major focus for clinical care and research in schizophrenia. To evaluate the content and quality of screening guidelines for cardiovascular risk in schizophrenia we performed a systematic review and quality assessment of guidelines/recommendations published between 2000-2010, using the Appraisal of Guidelines for Research and Evaluation (AGREE). AGREE domain scores varied between 18 identified guidelines. Most guidelines scored best on the domains 'Scope and Purpose' and 'Clarity of Presentation'. The domain 'Rigour of Development' was problematic in most guidelines, while the domains 'Stakeholder Involvement' and 'Editorial Independence' scored the lowest. The following parameters were recommended, in order of frequency: fasting glucose, BMI, fasting triglycerides, fasting cholesterol, waist, HDL/LDL, blood pressure, symptoms of diabetes. In terms of interventions most guidelines recommended advise on physical activity, advise on diet psycho-education of the patent, treatment of lipid abnormalities, treatment of diabetes, referral for advise and treatment, psycho-education of family and smoking cessation advice. Compared across all domains and content, 4 European guidelines could be recommended. Four of the evaluated guidelines are of good quality and should guide clinicians' screening and monitoring practices. Future guideline development could be improved by increasing its rigour and assuring user and patient involvement. Although good guidelines are available research shows that the implementation in daily clinical practice remains poor.