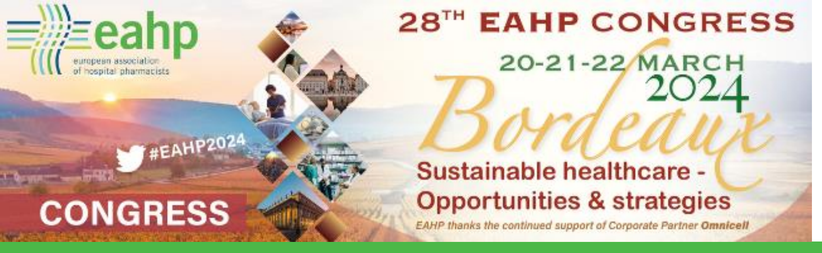

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4CPS-101

N05- ANTIPSYCHOTICS

SaludMadrid Hospital Universitario de Getafe

MONITORING METABOLIC SYNDROME IN OLANZAPINE-TREATED PATIENTS

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Background and Importance

Neuropsychiatric disorders are associated with significant reduction in life expectancy and increased risk of cardiovascular mortality

Olanzapine, can exacerbate the development of metabolic síndrome (MS), especially at the beggining of treatment.

Aim and Objectives

To study the association between olanzapine use and the development of metabolic alterations (MA) and to investigate the prescription of specific treatments for MS in patients who develop it.

Materials and Methods

Observational
Descriptive
Retrospective

Adult patients admitted to the **psychiatric hospital unit** and **prescribed oral olanzapine**

Start of treatment – end observation period:
January 2023 - April 2023

The collected **variables** from medical record were:

✓ **Sex, Age, Risk factors** (smoking and substance abuse) and **Body Mass Index** (BMI)

It was recorded whether there was:

✓ An **initial blood test** and a **follow-up test** conducted between 2-12 months after the start of treatment.

The following **parameters** were collected:

✓ **Cholesterol**
✓ **Triglycerides**
✓ **High-densitylipoprotein** (HDL)
✓ **Low-density lipoprotein** (LDL)
✓ **Blood glucose.**

Results

N= 42

- ✓ 57% were women
- ✓ Mean age (±SD): 40±15.5 years
- ✓ Substance use in 19.05%
- ✓ Tobacco use in 16.6%
- ✓ BMI was 24.5±5 kg/m^2.

<u>INITIAL BLOOD TEST</u>:
45%

- ✓ None of them with hyperglycemia
- ✓ Lipid abnormalities (LA): **31,6%** **(**hypertriglyceridemia in 50%)

<u>FOLLOW-UP BLOOD TEST</u>:
54,8%

- ✓ None of them with hyperglycemia
- ✓ Lipid abnormalities (LA): **52,17%**

HDL 41,6% **TG 50%**

Conclusion and Relevance

A substantial percentage of patients were not monitored for the potential development of MS associated with olanzapine use.

The study highlights the need to raise awareness among healthcare professionals about the importance of monitoring MS in these patients.

There was an observed increase in LA, possibly linked to olanzapine use.

Lipid-lowering medication use was limited when LA were present.

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