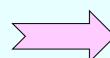


FOLLOW-UP OF PATIENTS TREATED BY PROLONGED-RELEASE OLANZAPINE IN A PSYCHIATRIC HOSPITAL

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BACKGROUND

Olanzapine is an atypical antipsychotic. Available in France since 2010, olanzapine pamoate (OP) is a prolonged-release suspension for intramuscular (IM) injection. OP is effective in the treatment of schizophrenic patients previously stabilised by oral olanzapine, and has been developed to improve compliance in these patients. In France, injection must be performed in a psychiatric hospital department with a 3 hours monitoring due to potential « post-injection syndrome » associated with OP.



PURPOSE: Overview of use and safety of OP since its availability in our hospital in May 2011

MATERIAL AND METHOD

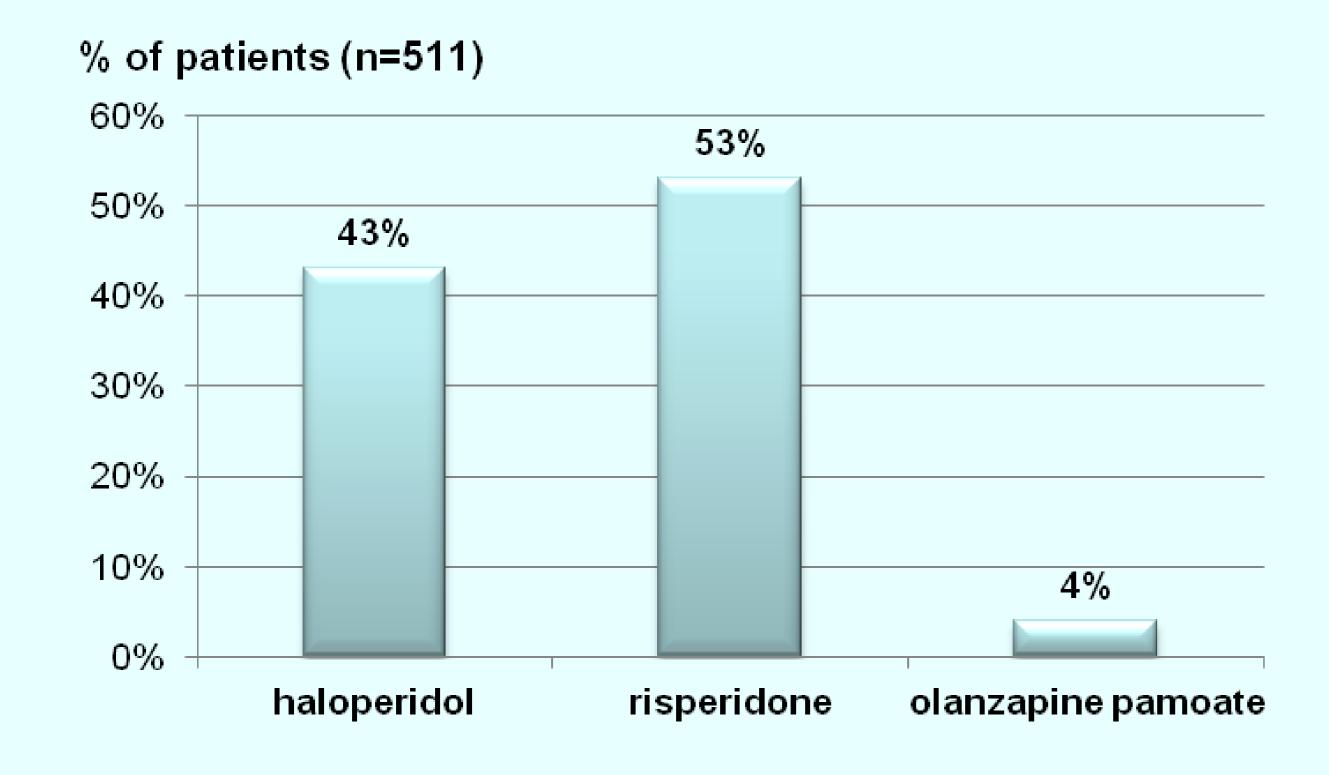
Retrospective study conducted from June 2011 to October 2012 in our psychiatric hospital of 750 beds

- 1) Analysis of dispensation of long-acting IM antipsychotics: number of patients treated by olanzapine, risperidone and haloperidol
- 2) Analysis of OP prescription: number of patients, dosage and dose adjustement, treatment duration
- 3) Analysis of clinical data: diagnosis, treatment initiation and disruption, monitoring post-injection (blood pressure, heart rate, conscious state) and safety (other advserse events).

RESULTS

OP dispensation and prescription data

1) During the study period, 511 patients are treated by longacting IM antipsychotics:



- 2) OP has been administered in 19 schizophrenic patients, mainly not compliant.
- According to recommandations:
 - Monthly 405mg dose has been prescribed initially for 4 patients
 - 300mg per 2 weeks has been prescribed for 1 patient
 - Maintenance dosage after 2 months has been prescribed for 7 patients
- 3 patients have required dose adjustements
- 4 patients have had only 1 injection

For the 10 patients currently treated, average treatment duration is 8 months

OP clinical data

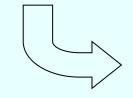
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3) a- Monitoring post-injection data are collected on a specific report form



- Monitoring has been realized for each injection in clinical departments.
- ❖ Altered consciousness has been reported in 1 patient (1/19 patients) during 3 hours post-injection without blood pressure or heart rate abnormalities and with normal vigilance 3 hours later.

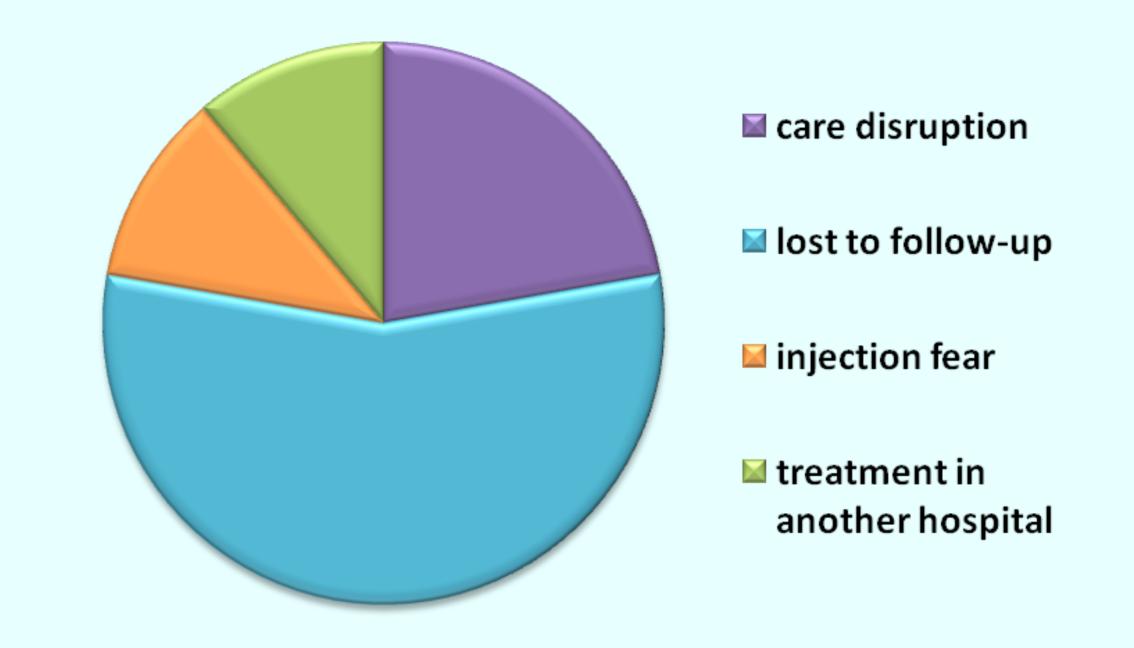


This suspected post-injection syndrome has been notified to pharmacovigilance services.

Except this event, OP is well tolerated.



3) b- 9 treatment disruptions are registered during study period:



CONCLUSION

OP prescription is less frequent relatively to other long-acting IM antipsychotics, probably because of its recent availability, physicians reluctance due to risk of post-injection sydrome and requirement of hospitalisation and monitoring in psychiatric department. This monitoring is strictly observed and reported in our hospital using our specific support. Only one mild adverse effect was reported but confirms the importance of post-injection monitoring and to continue the follow-up. OP is an additional therapeutic option for schizophrenic patients with poor compliance.