



NeuRA

Discover. Conquer. Cure.

SCHIZOPHRENIA LIBRARY

SCHIZOPHRENIA Factsheet

October 2020

What is mode of administration?

Studies have shown that about 80% of patients relapse to psychosis within five years of initial treatment. This is often due to lack of adherence to antipsychotic medications. Long-acting injectable antipsychotics are a treatment option for patients who are not adhering to treatment or who do not remember to take their oral preparations.

What is the evidence for mode of administration?

Moderate to high quality evidence shows long-acting injectable second-generation antipsychotics are more effective than placebo injections for symptom improvement and functioning. There were small effects of better functioning, fewer relapses, longer time to relapse, and fewer hospital days with long-acting injectable second-generation antipsychotics compared to oral second-generation antipsychotics. There was also a large effect of lower hospitalisation rates with long-acting injectables.

High quality evidence finds no differences in rates of at least one adverse event between long-acting injectable and oral antipsychotics, although there were more extrapyramidal symptoms and low-density lipoprotein cholesterol change with injectables. Moderate to high quality evidence also finds more anxiety, and moderate to low quality evidence finds more akinesia with long-acting injectable antipsychotics.

For individual antipsychotics, moderate to low quality evidence finds fewer relapses with long-acting injectable fluphenazine compared to oral fluphenazine. Moderate to high quality evidence found no differences in response or relapse rates between injectable and oral risperidone, olanzapine, or aripiprazole. Moderate quality evidence finds no differences in response or relapse rates between injectable and oral haloperidol. There were no differences between injectable or oral formulations in adverse effects, apart from a small effect of less hyperprolactinemia with long-acting injectable risperidone and more dropouts due to inefficacy with long-acting injectable olanzapine.

For more information see the technical table



NeuRA

Discover. Conquer. Cure.

NeuRA (Neuroscience Research Australia) is one of the largest independent medical and clinical research institutes in Australia and an international leader in neurological research.

Diseases of the brain and nervous system pose the greatest health, economic and social burden of any disease group because they are chronic, debilitating and have no known cures.

Medical research is the cornerstone of efforts to advance the health and wellbeing of families and the community. Our dedicated scientists are focussed on transforming their research into significant and practical benefits for all patients.

While we hope you find this information useful, it is always important to discuss any questions about schizophrenia or its treatment with your doctor or other health care provider.

HOW YOUR SUPPORT HELPS

We are able to make significant advances due to the generosity of countless people. Your donation allows us to continue to work towards transforming lives. For information on how you can support our research, phone **1300 888 019** or make a secure donation at neura.edu.au/donate/schizophrenia.