Reducing the use of high dose antipsychotic medication in acute adult inpatient psychiatric units

Shay-Anne Pantall1*, Sarah Warwicker2 and Lisa Brownell1
1Birmingham and Solihull Mental Health NHS Foundation Trust and
2University of Birmingham
*Corresponding author.

doi: 10.1192/bjo.2021.893

Aims. To evaluate the use of antipsychotics, and high dose antipsychotic treatment (HDAT) in psychiatric inpatient units

Background. The Royal College of Psychiatrists published a consensus statement on high dose antipsychotic medication in October 1993. Such treatment carries an increased risk of adverse effects including towards ventricular tachycardia and sudden death.

Method. A retrospective case note review of all male patients on acute adult inpatient units in a psychiatric hospital in South Birmingham on a date in June 2018 (n = 45) including review of electronic patient records and prescriptions. This was compared with the results of an earlier study, with identical methods, undertaken in June 2015.

Result.

• In both 2015 and 2018, only a minority of patients (20% and 11% respectively) were informal.
• In both 2015 and 2018, the majority of inpatients had a diagnosis of schizophrenia (54% and 67%)
• In both 2015 and 2018, 93% inpatients were prescribed antipsychotic medication.
• In 2015, 56% patients were prescribed HDAT. This reduced in 2018 to 16%.
• This reduction in use of HDAT was almost entirely due to a reduction in the prescription of PRN antipsychotic medication.
• In terms of regularly prescribed antipsychotic medication, in both years, the most commonly prescribed drug was flupentixol, with a range of other second generation oral and long acting medications being prescribed, usually at doses within BNF limits.

Between the two years, there was a substantial change in the prescribing of PRN antipsychotics. In 2015, 59% individuals were prescribed at least one PRN antipsychotic (27% were prescribed two). In 2018, this reduced to 40% prescribed at least one, and only 2% being prescribed 2 PRN antipsychotics. In both years, oral quetiapine was a common choice (39% patients in 2015 prescribed oral quetiapine, and 34% in 2018). In 2015, 39% patients were prescribed oral or intramuscular aripiprazole, while this reduced to 7% in 2018.

Conclusion. This audit cycle has demonstrated that use of an evidence based approach has been instrumental in improving patient care. The Audit evidenced areas of good practice in holistic assessment and use of psychological therapies and importantly highlighted areas of significant improvement needed including initial monitoring of medication response and referral onwards of parents/carers considering comorbidities, social and educational context and 100% compliance in offering psychological interventions.

Changes in patients characteristics and service provision in liaison psychiatry during the COVID-19 pandemic

Frederica Passosi1*, Miguel Constante1, André Delgado1 and Maria João Heitor2
1Departamento de Psiquiatria e Saúde Mental, Hospital Beiriz Ângelo and 2Departamento de Psiquiatria e Saúde Mental, Hospital Beiriz Ângelo, Instituto de Saúde Ambiental, Faculdade de Medicina, Universidade de Lisboa
*Corresponding author.

doi: 10.1192/bjo.2021.895

Aims. The SARS-CoV-2 pandemic has led to core changes in the healthcare systems worldwide in terms of access, resources and patient’s management. Patients admitted to a general hospital with COVID-19 are at a higher risk for developing or exacerbating...