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INTERNATIONAL SCIENTIFIC INTERDISCIPLINARY CONFERENCE

of Young Scientists and Medical Students

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25-27

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Strelnikova Kseniia

A CLINICAL AND PHARMACOLOGICAL ANALYSIS OF THE
TREATMENT OF PATIENTS WITH SCHIZOPHRENIA OF PSYCHIATRIC
DEPARTMENT OF KHARKIV'S CLINIC

Kharkiv, Ukraine

Kharkiv National Medical University

Department of Pharmacology and Medical prescription

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In patients with schizophrenia a high level of disability and an increased risk of death due to suicide have been established with the risk being 2–3 times higher than in the general population. Antipsychotic drugs form the basis of pharmacotherapy for schizophrenia, acting primarily by blocking dopamine receptors and classified as typical or 1-st generation (chlorpromazine, haloperidol etc) and atypical or 2-nd generation (quetiapine, risperidone, olanzapine etc), which also determines the speed of onset of effect and the range of side effects. Therefore, the aim of this study is to conduct a comparative analysis of the efficacy and safety of 1-st- and 2-nd-generation antipsychotic drugs in patients with schizophrenia of psychiatric department of Kharkiv's clinic. Nineteen archived medical records of patients diagnosed with schizophrenia were selected for the study. The criteria for the clinical and pharmacological analysis included a diagnosis of schizophrenia, treatment with typical or atypical antipsychotics, duration of hospitalization, treatment efficacy and adverse effects. Statistical, analytical, and logical analysis methods were used to evaluate the obtained results. Analysis of prescription records showed that among the 19 patients 7 received typical antipsychotics (haloperidol) while 12 received atypical antipsychotics (risperidone, quetiapine, olanzapine, aripiprazole) administered mainly orally, intramuscularly in acute conditions and occasionally in depo-form. Analysis of the effectiveness of therapy demonstrated that 13 patients (68.4%) achieved clinical remission and 6 patients (31.6%) achieved partial remission. A elimination of positive psychotic symptoms was observed after 7-10 days of treatment with typical and after 10-14 days of treatment with atypical antipsychotics. Assessment of the safety profile of pharmacotherapy revealed that adverse effects occurred in 80% of patients receiving typical and in 38.5% of those receiving atypical antipsychotics.

Extrapyramidal disorders were more characteristic of typical antipsychotics (85.7%), whereas metabolic disturbances were more commonly associated with atypical antipsychotics (41.7%). In most cases, adverse reactions were mild to moderate in severity and did not require discontinuation of therapy.

Thus, the obtained results of the clinical and pharmacological analysis of schizophrenia pharmacotherapy indicate that the first- and second-generation antipsychotics demonstrated clinical efficacy in the treatment of schizophrenia. Typical antipsychotics provided a faster therapeutic effect but were associated with a higher incidence of extrapyramidal adverse effects, whereas atypical antipsychotics showed a more favorable neurological safety profile but were more frequently linked to metabolic disturbances. Therefore, the choice of antipsychotic therapy should be individualized, taking into account both therapeutic efficacy and the risk of adverse effects in each patient.