Introduction. Long-acting injectable second-generation antipsychotics (LAII-SGA) are typically used to maintain treatment adherence in patients with chronic schizophrenia and recent studies suggest that they may also provide an effective treatment strategy for patients with recent diagnosis schizophrenia [1,2,3]. Thus, the aim of the present study was to evaluate the action and the efficacy of Paliperidone Palmitate Long-Acting Injection (PP-LAI) on non-core symptoms of recent diagnosis schizophrenia during a follow-up period of almost 12 months in the context of the "real world" everyday clinical practice.

Methods. This multicentric retrospective observational study, not funded or sponsored, was conducted in several mental health facilities in Central and South Italy among patients with recent diagnosis schizophrenia who were initiated with PP-LAI, based on an attending physician’s clinical judgement and patient’ agreement. Patients with 5 or less years of illness, classified as recent diagnosis schizophrenia, were evaluated and included in the analysis. Patients were allowed to continue on any prescribed antidepressants, anxiolytics, or mood stabilizers, if any, during the trial. Patients charts were collected and reviewed and data we obtained at baseline and prospectively followed up to 12 months. To date, 70 subjects (41 males and 29 females with a mean age of 25.1 years) were included and evaluated. Data on sociodemographic and psychopathological variables were collected at clinical interview. Psychopathology was assessed with the PANSS (as made by Corigliano et al. [4], we used the PANSS to extract the following 5 factors: (a) positive (POS) (P1, delusions; P3, hallucinatory behavior; P5, grandiosity; and G9, unusual thought content); (b) negative (NEG) (N1, blunted affect; N2, emotional withdrawal; N3, poor rapport; N4, passive withdrawal; N6, lack of spontaneity; and G7, motor retardation); (c) disorganized/concrete (DS) (N5, difficulty in abstract thinking; P2, conceptual disorganization; and G11, poor attention); (d) excitement (EXC) (P4, excitement; P7, hostility; G8, uncooperativeness; and G14, poor impulse control); depressed (DEP) (G2, anxiety; G3, guilt feelings; and G6, depression). Global functioning was assessed with the Global Assessment of Functioning (GAF) Scale. Suicide risk was assessed with the Scale for Suicide Ideation (SSI). Obsessive-compulsive symptoms were assessed with the Yale–Brown Obsessive Compulsive Scale (YBOCS). Anhedonia was measured with Snith-Hamilton Pleasure Scale (SHAPS). Alexithymia was assessed with 20-items Toronto Alexithymia Scale (TAS-20). Craving was measured with VASCrev scale.

Results. The mean dosage of PP-LAI at the endpoint was 86.7 mg and the majority of individuals received a dosage of 75 mg/om. PPLAI was effective in reducing both positive and negative symptoms as measured by PANSS. As well, all DIS, EXC and DEP components of PANSS improved with PP-LAI treatment at 12 months (Figure 1). PP-LAI treatment was effective in reducing scores of anhedonia (as measured by SHAPS), suicidal ideation (as measured by SSI) and obsessive-compulsive sympotms (as measured by Y-BOCS total score). Also functioning (as measured by GAF) and craving (as measured by VASCrev) improved with the PP-LAI. However, total score on TAS-20 remained relatively stable and were not influenced by the PP-LAI administration (Figure 2). PP-LAI was well tolerated and 8 subjects reported a slight increase in prolactin levels (all successfully managed with dosage reduction), 7 subjects reported a mild subjective sedation and 15 subjects reported a mild pain on the site injection (in almost one administration). Patients recruitment and charts evaluation is still ongoing to further widen the sample. Therefore the results must be considered preliminary.

Conclusions. PP-LAI was effective in reducing both positive and negative symptoms in subjects with recent diagnosis schizophrenia. As well, an improvement in disorganization and excitement was observed with PP-LAI treatment at 12 months. Moreover, PP-LAI treatment was effective in reducing scores of depressive symptoms, obsessive-compulsive symptoms (even if Y-BOCS total score were relatively low at the baseline) and anhedonia. Suicide ideation was relieved with the treatment, as well as the global functioning and craving improved with the PP-LAI. However, total score on TAS-20 remained relatively stable and were not significantly influenced by the treatment, suggesting alexithymia as an independent variable. PP-LAI was generally well tolerated. Patients recruitment and charts evaluation is still ongoing to further widen the sample. Therefore the results must be considered preliminary.


Corresponding Authors: Domenico De Berardis, MD, PhD. SSN, Dipartimento di Salute Mentale, Servizio Psichiatrico Diagnosi e Curativa, Ospedale Civile “G. Mazzini”, ASL 4 Teramo, p.za Italia 1, 64100 Teramo (Italy). E-mail: domenico.deberardis@asteramo.it