

Access to olanzapine LAI reduces hospital admissions in a complex population

Olanzapine long-acting injection: Does the benefit outweigh the risk of Post Injection Syndrome?

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Introduction

- Olanzapine Long Acting Injection (LAI) is an effective treatment of schizophrenia
- Post Injection Syndrome (PIS) is a rare but potentially serious adverse effect that occurs in 0.07% of injections
- The 2-hour monitoring period often limits the utility of olanzapine LAI in consumers who would most benefit

Aims

- To describe the group of consumers receiving olanzapine LAI
- To assess changes in hospital admissions following initiation in consumers prescribed olanzapine >12 months

Method

Point prevalence study

Population: Community Mental Health consumers receiving olanzapine LAI

Setting: Community Mental Health units in Northern Adelaide

Current strategies to improve PIS monitoring

- Improving the waiting environment in collaboration with OT
- Increasing understanding (education and tailored consumer information)
- Mitigating risk (carer education and alert wristbands)

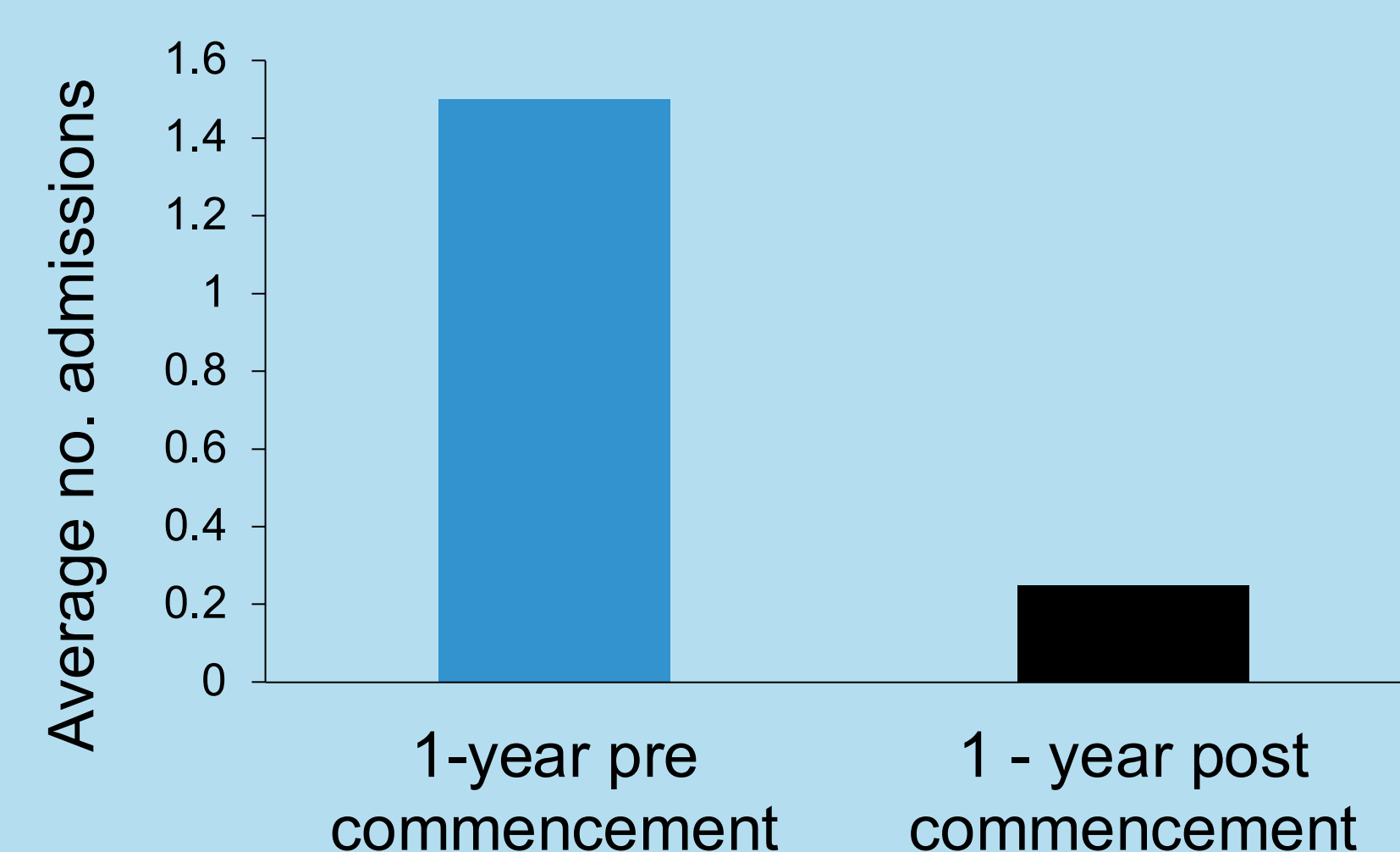


Results

- In total **18 consumers** were receiving olanzapine LAI
- On average **4.4 (range 1-9)** previous antipsychotics had been trialed
- This included **8 (44%)** patients who had failed a trial of clozapine

Demographics	n=18
Age, average (range)	34 (19-55)
Male, n (%)	9 (50%)
Length of olanzapine treatment, ave (range)	1.2yrs (20 days-2.3yrs)
Current active treatment order, n (%)	10 (56%)

- **8 consumers** had been maintained on olanzapine LAI for >12 months
- **Change in admission rate 12 months pre and post commencement:**



Conclusions

- Olanzapine LAI was prescribed to a complex group of consumers, the majority with treatment resistant schizophrenia
- A reduction in hospital admissions following commencement demonstrates a clear benefit within this population
- Individual risk and benefit analysis and targeted strategies to improve adherence to monitoring is a priority

For more information

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