

Descriptive study about the use of Asenapine in a sample of inpatients along 2017

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Introduction

Asenapine is a second-generation antipsychotic with demonstrated efficacy in the treatment of mania and mixed states associated with bipolar I disorder⁽¹⁾. Clinicians tend to use Asenapine as adjunctive antipsychotic in the treatment of manic episodes that are less severe in terms of manic and psychotic symptoms, but more complex regarding the clinical profile⁽²⁾. Some studies also show efficacy of Asenapine over placebo in schizophrenia and schizoaffective disorder⁽³⁾.

Objectives

To assess the prescribing pattern and the clinical profile of a sample of inpatients treated with Asenapine at discharge in an acute psychiatric unit over one year (2017).

Methods

Retrospective descriptive study analyzing the following variables: age, gender, psychiatric diagnosis according to ICD-10 criteria, psychiatric comorbidities, number of prior hospitalizations, Asenapine dose and add-on therapy.

Results

Data from 18 patients were analyzed. On average, the patients of the sample were aged 44.2 years (SD ± 14.1). There were 16 women (89.9%) and 2 men (11.1%). The mean dose of Asenapine was 16.1 mg/day (SD ± 7.2) with a range between 5-30 mg/day. The mean of previous hospitalizations was 3.4 (SD ± 4.9) and its modal value was 1. The rest of results are shown in Table 1 and Figure 1.

Primary mental disorder:	
● Bipolar disorder (type of episode):	
○ Manic	3 (16.7 %)
○ Mixed	3 (16.7 %)
○ Depressive	2 (11.1 %)
○ Non-specific	3 (16.7%)
● Schizoaffective disorder	4 (22.2 %)
● Others	3 (16.7 %)
Psychiatric comorbidities:	
● Yes	7 (38.9 %)
● No	11 (61.1 %)

Table 1: Diagnostic features of the sample (n = 18).

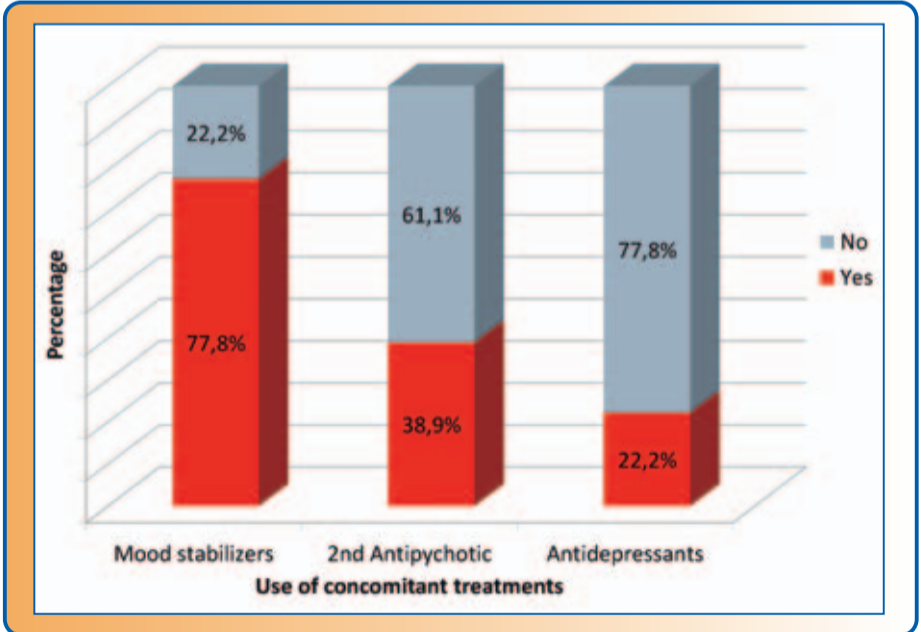


Figure 1: Add-on therapy (n = 18)

Conclusions

Patients of the sample were mainly young women with less than 4 prior hospitalizations. The average dose of Asenapine at discharge was lower than the maximum dose proposed by the FDA and the EMA. The majority used Asenapine as an adjunctive treatment to mood stabilizers and in only 3 cases it was used in monotherapy. Nearly 40% of the sample had no bipolar disorder diagnosis. Due to the size of the sample, no statistical inferences were made.

References

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