

Patient's choice in clozapine dosage titration; capillary blood versus endovenous extraction

M. de Dios Felis¹, S. Castillo Magaña², E. Mur Mila², J. Moreno Montmany², M.A. Cencerrado Muñoz², D. Navas Alcalà², A. Trabsa³, E. Monteagudo Gimeno¹, S. Pérez Gonzalez¹, D. Sanagustin Bosqued⁴, S. Oller Canet⁴

¹Hospital del Mar, Institut de Neuropsiquiatria i Addiccions, Barcelona, Spain, ²Centre de Salut Mental Martí i Julià, Institut de Neuropsiquiatria i Addiccions, Santa Coloma De Gramenent, Spain, ³Hospital del Mar (Consorti Mar Parc de Salut de Barcelona), Psychiatry, Barcelona, Spain, ⁴Institut de Neuropsiquiatria i Addiccions (INAD)- Parc Salut Mar. Barcelona, Spain, Psychiatry, Barcelona, Spain

Introduction

Approximately 30% of Schizophrenia patients are considered resistant to antipsychotic treatment and clozapine is the only drug approved in patients with antipsychotic resistance. However, prescription rates are low and there is a theoretical delay of initiation of 48 months partly due to the need of haematological monitoring.

Objective

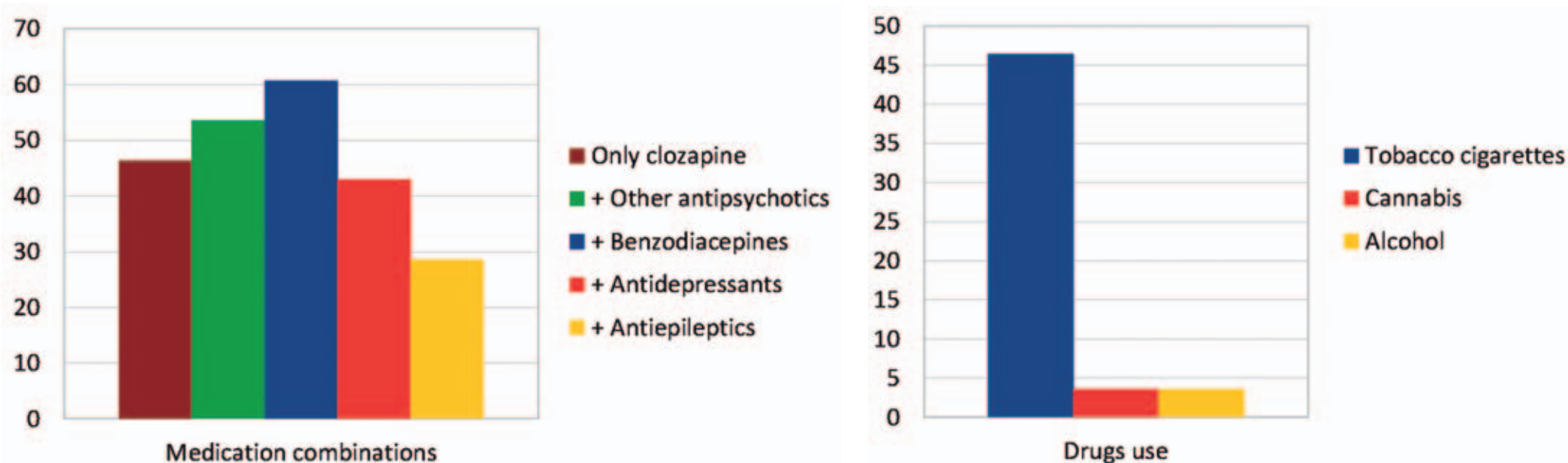
To describe if patients prefer to do haematological controls though capillary blood test or with endovenous blood.

Methods

Patients in treatment with clozapine were recruited in ambulatory mental health devices during 2017 and followed up for 6 months. The allocation was randomized and not blinded. Capillary blood was analysed with Hemocue WBCDIFF which quantifies total leukocytes and a differential recount of with cells.

Results

A total of 30 patients were recruited and 28 of them completed the follow up. In the sample 67.9% were male, mean age was 43.07 years (SD+/- 9.68). Mean duration of treatment with clozapine was 11.3 years (SD+/- 7.6), 46.4% were treated only with clozapine, 53.6% needed oral treatment with other antipsychotic drugs (mostly aripiprazole), 60.7% needed treatment with benzodiazepines, 42.9% needed antidepressant (mostly SSRI) and 28.6% needed antiepileptic. 46.4% reported smoking, 3.6% alcohol use and 3.6% cannabis use. After randomisation 50% of the patients were included in the capillary blood group, only patients from this group were asked about extraction method preference and 93.3% of them choose capillary blood extraction.



Discussion

Clozapine titration through capillary blood extraction might increase its prescription as it would make monitoring easier both for patients and the health system.

Bibliography

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