

PHYSICAL HEALTH MONITORING OF PATIENTS TAKING ANTIPSYCHOTIC MEDICATION IN PRIMARY AND SECONDARY CARE: A COMPLETE AUDIT

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Introduction: Mortality due to physical illness is greater in schizophrenia than in the general population. Antipsychotics have been linked with weight gain, diabetes and hyperlipidaemia. UK guidelines recommend annual health screens in primary care, and secondary care ensure patients receive this and document results in notes.

Objectives: To establish whether patients taking antipsychotics received annual monitoring of U&E, FBC, Lipids, Glucose, LFT, weight and blood pressure. Standards for the audit were derived from the Maudsley Prescribing Guidelines and NICE Guidelines on Schizophrenia.

Aims: To improve physical health monitoring for our patients.

Methods: We retrospectively reviewed 82 case notes. Intervention following initial audit included education of professionals involved in monitoring and inclusion of a Prescribed Medication Monitoring Form in case notes. Re-audit occurred 12 months after initial audit. Statistical analysis used χ^2 -test with Yates' Continuity Correction.

Results: Following intervention recommendation of physical health monitoring to primary care increased from 40.2% to 76.8% ($P < 0.0001$), as did monitoring frequency: Weight (7.3% to 54.3%), BP (7.3% to 49.4%), U&E (64.6% to 82.5%), FBC (61.0% to 78.5%), Lipids (47.6% to 72.2%), Glucose (59.8% to 79.7%) and LFT (61.0% to 81.3%) ($P < 0.05$ for all parameters).

Documentation of blood results in secondary care notes was also increased ($P < 0.05$).

Conclusions: Monitoring of physical health comorbidity in patients with serious mental illness was poor in the initial audit. This can be improved in both primary and secondary care by relatively simple measures and by increasing clinicians' understanding of the importance of monitoring.