P.1301

Gender differences in dopamine partial agonists treatment in schizophrenia: a longitudinal 18 month naturalistic follow-up with cariprazine

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BACKGROUND

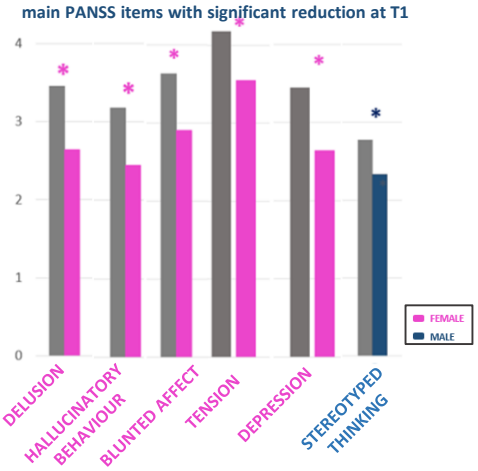
Cariprazine is a third-generation antipsychotic approved for the treatment of schizophrenia. Data in the literature suggest efficacy of cariprazine for a wide range of symptoms, with good tolerability and safety profile [1,2,3]. However, there are few real-life patient data in the literature, especially when exploring its long-term efficacy and comparing outcomes by gender. In this context, the purpose of this study is to investigate the effects of cariprazine treatment on specific psychopathological domains and its side effects by comparing outcomes by gender after long-term treatment in real-life experience.

METHODS

A sample of 20 individuals diagnosed with schizophrenia and treated with cariprazine were included in the present naturalistic longitudinal study. Assessment included: a data sheet for sociodemographic and clinical characteristics, the SCID, the Positive and Negative Symptom Scale (PANSS) [4] for psychotic spectrum symptoms and the St. Hans Rating Scale (SHRS)[5] for extrapyramidal side effects. Patients were assessed by trained psychiatrists or psychiatry residents from the University of Pisa before the start of cariprazine treatment (T0) and after 6 (T1), 12 (T2), and 18 months (T3). Chi-square, paired t-test, Wilcoxon's nonparametric test were used depending on the characteristics of the variables involved. All statistical analyses were performed using Statistical Package for Social Science, version 22.0 (SPSS Inc.), and a p value <.05 was considered statistically significant.

RESULTS

The total sample included 11 (55%) females and 9 (45%) males. At baseline, no significant differences in sociodemographic and clinical characteristics were observed between genders. Mean PANSS scores overall and by subdomain showed a significant reduction at all follow-up time points, but this was not statistically significant for the overall sample, the female group, and the male group (except for Negative scale at T2 and T3 and Positive symptoms at T3 in overall sample, $p < 0.05$). However, females showed a significant decrease in the score of specific PANSS items at T1 ($p < 0.05$), while males reported a significant decrease in the score of different ones. Extrapyramidal symptoms were predominantly mild. Moderate or mild-moderate forms occured in female in the form of parkinsonism (27.3%) and dystonia (27.3%) and in male in the form of parkinsonism (11.1%) or psychic and motor akathisia (11.1%).



CONCLUSIONS

Cariprazine confirmed a good efficacy particularly in females, who showed more marked improvements in a broader range of symptoms besides a different tolerability profile. Our findings support the evidence for gender-specific treatment of schizophrenia and point to the need for further longitudinal studies aimed at gender-tailored medicine.

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