Medical Xpress

Patients with schizophrenia benefit from 'adherence therapy'

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(Medical Xpress)—More than half of all patients suffering from schizophrenia do not take antipsychotic medication as prescribed, although this is essential for their effective treatment, according to research published today. The main preventable cause of poor symptom control and relapse results from patients not taking their medication as prescribed.

Non-adherence is one of the most important factors increasing NHS treatment costs. The cost of treating a non-adherent patient with schizophrenia is at least £5000 per year more than one that takes their medication.

In a clinical trial involving over 100 patients with schizophrenia, adherence therapy (AT) was found to be significantly more effective at improving psychiatric symptoms compared to usual treatment.

AT adopts a very different approach to current clinical practice that typically focuses on patient education, or giving patients information about their illness and treatment. AT focuses on challenging patients' beliefs about medication, helping them rethink the place of medication in managing their illness and enabling them to lead full and productive lives. During adherence therapy, patients typically receive eight individual sessions with a mental health worker.

"Adherence is a complex problem and time needs to be invested in helping patients explore what they think about medication - there is no

quick fix to get patients to take medication," said lead author Professor Richard Gray of UWE Bristol's Faculty of Health and Life Sciences.

Published today in the international peer-reviewed journal *Schizophrenia Research*, the results of the study show how mental health professionals can effectively address what is a major issue for many patients.

"Mental health professionals often rely on patient education that we know does not work," continued Professor Gray.

The results of this study are particularly important because they challenge current National Institute for Health and Clinical Excellence (NICE) guidance on the place of AT in schizophrenia treatment. Professor Gray explains, "Initial trials were very positive, but a major study in 2006 seemed to suggest that AT was not effective. Consequently NICE guidelines state that AT should not be used. The results of this and other trials suggest that this guidance is wrong.

"Helping patients adhere to treatment is bread and butter to mental health professionals. But currently we don't do it very well. The findings from this trial also lend weight to the argument that intervening as soon as possible after an acute episode of illness in patients with schizophrenia affords the best chance to affect change.

"Our research provides evidence that AT offers an effective approach to improving outcomes for what is a serious and potentially debilitating illness, and offers a solution to a very expensive problem for the NHS."

Provided by University of the West of England

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