

Major schizophrenia study finds striking similarities across 37 countries in 6 regions

November 16 2009

An international study of more than 17,000 people with schizophrenia has found striking similarities in symptoms, medication, employment and sexual problems, despite the fact that it covered a diverse range of patients and healthcare systems in 37 different countries.

The research, published in the November issue of IJCP, provides a valuable international profile of the mental health disorder, which is estimated to affect as many as one in every 250 people at some point in their lives. [Schizophrenia](#) is the fifth leading cause of years lost through disability in men and the sixth leading cause in women.

"The Worldwide-Schizophrenia Outpatient Health Outcomes study (W-SOHO) was a three-year observational study designed to assess costs and outcomes in outpatients using antipsychotics" says lead author Dr Jamie Karagianis from Eli Lilly Canada Inc.

"It has enabled us to build up a valuable international picture of the demographics and treatment of schizophrenia across ten European countries and 27 countries from East Asia, Latin America, North Africa and the Middle East.

"Minimal selection criteria were applied by the 1,563 clinicians who took part to ensure that the patients were representative of those receiving treatment in actual clinical practice settings across the world.

"Baseline data on the 17,384 patients - who were all starting or changing

their antipsychotic medication - showed that they had an average age of 38 and 57% were male. Median duration of their illness was seven years and one in ten were receiving antipsychotic medication for the first time.

"On average, 19% were in paid employment, 69% were living in dependent housing and 62% had reported [sexual problems](#) in the previous month.

"Although there were some regional and country variations, on the whole the study provided a strikingly similar overall pattern when it came to key health, medication and socio-economic factors."

Patients were assessed at baseline and at three, six, 12, 18, 24 and 36 months. All clinicians taking part in the study were free to determine what treatment and medication their patients received and no drugs were provided by the study sponsor.

Key findings of the W-SOHO survey included:

- 26% of the study participants were taking more than one antipsychotic and about 74% were taking other prescribed drugs at the same time. 10% were taking [antipsychotics](#) for the first time.
- The key reasons for changing medication were the same across all the regions surveyed, with two-thirds of the investigators citing lack of effectiveness, followed by intolerance, patient request and incomplete adherence to the medication.
- Just over 34% of patients had been admitted to an inpatient facility because of their schizophrenia in the last six months. With the exception of the Latin American region (40.8%) all the

other regions showed very similar rates, ranging from 31.2% to 36.3%.

- Sexual dysfunction averaged 61.5%. With the exception of East Asia (33.5%), the other regions reported similar levels ranging from 57.9% to 67%.
- The CGI-SCH scores (used to measure the severity of the illness) were remarkably similar, with an overall average of 4.4 and regional scores ranging from 3.9 to 4.7. The positive score averaged 3.9, negative score 4.0, depressive score 3.4 and cognitive score 3.7.
- Just under 26% of the patients had ever attempted suicide, with regional scores ranging from 21.7% to 30.1%.
- Paid employment status was similar, averaging 19% and ranging from 16.2% to 22.6%.
- Just under a third of patients (32.1%) were in a relationship, ranging from 25.1% to 38.6% in five of the six regions. People in East Asia were much more likely to be in a relationship (47.4%) than anywhere else.

"There has been considerable debate about whether developed and developing countries display different outcomes when it comes to schizophrenia and 21 of the 37 countries in our study are emerging or developing economies" says Dr Karagianis.

"Despite being drawn from a variety of economies, cultures and practice settings, the patients who took part in the W-SOHO study were remarkably similar across the six regions in terms of demographic and clinical characteristics. However, there were also important differences

noted in some areas and these differences have as much relevance to clinical practice as the similarities observed.

"We hope that this study will help to build up a clearer picture of schizophrenia and its treatment across the world. One thing that is very clear from our study is that this [mental health disorder](#) has a profound impact on the lives of people, irrespective of geographical borders."

The regions, countries and patient numbers included in the study were:

- Central and Eastern Europe - Czech Republic (477), Hungary (189), Lithuania (100), Poland (599), Romania (136), Russia (159), Slovakia (301), Slovenia (214)
- Northern Europe - Denmark (31), France (915), Germany (2,869), Ireland (53), Netherlands (160), UK (263)
- Southern Europe - Greece (690), Italy (2,869), Israel* (76), Portugal (166), Spain (1,987) *included in this category because of similar ethnicity, economy and healthcare systems
- Latin America - Argentina (349), Chile (152), Colombia (197), Costa Rica, El Salvador, Guatemala and Honduras pooled (267), Mexico (1,019), Peru (96), Puerto Rico (217), Venezuela (269)
- North Africa and the Middle East - Algeria (300), Egypt (183), Turkey (662), Saudi Arabia (196)
- East Asia - Korea (821), Malaysia (105), Taiwan (297).

More information: *International Journal of Clinical Practice*, Worldwide-Schizophrenia Outpatient Health Outcomes (W-SOHO): baseline

characteristics of pan-regional observational data from more than 17,000 [patients](#). Karagianis et al. IJCP. 63.11, 1578-1588. (November 2009)

Source: Wiley

Citation: Major schizophrenia study finds striking similarities across 37 countries in 6 regions (2009, November 16) retrieved 6 May 2024 from <https://medicalxpress.com/news/2009-11-major-schizophrenia-similarities-countries-regions.html>

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