

Death risk higher with mental illness in drug trials

August 30 2013



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(HealthDay)—Adults with psychiatric illnesses such as schizophrenia, depression, and bipolar disorder who participate in clinical trials of psychopharmacological drugs have a higher mortality risk, in many cases by suicide, according to a study published online Aug. 28 in *JAMA Psychiatry*.

Arif Khan, M.D., from the Northwest Clinical Research Center in Bellevue, Washington, and colleagues analyzed <u>mortality data</u> for 92,542 patients with <u>psychiatric illnesses</u> from the U.S. Food and Drug Administration Summary Basis of Approval reports for 28 psychopharmacological agents approved between 1990 and 2011.



The researchers found that, compared with the general population, the risk of mortality was 3.8-fold higher in patients with schizophrenia, 3.15-fold higher in patients with depression, and 3.0-fold higher in patients with bipolar disorder. Death was due to suicide in 41.1 percent of 265 cases. Assignment to psychotropic agents rather than placebo did not increase mortality risk, with the exception of heterocyclic antidepressants.

"These data suggest that increased mortality rates reported in population studies are detectable among adult patients with psychiatric illnesses participating in psychopharmacological trials," Khan and colleagues conclude.

Arif Khan founded Columbia Northwest Pharmaceuticals.

More information: Abstract

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