

# IMPROVEMENT OF QUALITY ASSISTANCE TO DUAL PATIENTS WITH PERSONALITY DISORDERS ASSOCIATED

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**Objectives:**

Evaluate the efficacy of treatments with LAI antipsychotics in dual patient with personality disorders associated in addictions care networks of Galicia and Northern Portugal.

**Background:**

Care of addicted patients with an associated Mental Disorder is a challenge for the networks of Addiction and Mental Health, specially in patients with a Personality Disorder (1)(2).

The assistance model, must be comprehensive and integrated, with flexible treatment programs with long-acting injectable (LAI) antipsychotics, multidisciplinary teams, located in the addiction centers.

In Galicia, this is a project coordinated by local Psychiatry services and managed by hospital pharmacy, bringing significant cost savings (3).

**Materials and Methods:**

This is an open, observational, indication-prescription study (4), approved by Ethical Commissions from Galicia and Porto.

Sample: 172 patients, 32 in Portuguese centers, 140 in the Galician network; 102 from Corunha Addiction Center, where this program was introduced in Oct/2014; due to this sample's size, the result analysis is mainly based on Corunha results.

Instruments: Medical records and CGI and SMARTS scales (5).

**Results:**

**FIG.1.** Significant differences had been found between both networks in the use of LAI: the portuguese network tends to a larger use of typical LAI in contrast of the atypical LAI used in the galician one, where the off-label use reaches around 40%, opposite of the 20% by the portuguese.

**FIG.2.** A reason for these off-label prescriptions in the galician network is the larger number of patients with associated Personality Disorder (PD), highlighting de mixed PD (B + C), followed by the B cluster.

**FIG.3.** The most used LAI in the approach of the PD were PLP and ARP, fundamentally ARP-LAI, both registering a satisfactory clinical response, being the most prominent secondary effects with PLP-LAI, posing no significative interference on the treatment of these patients.

**FIG.4.** The continuity and abstinence rate is high on both collectives, slightly less on dual patients with PD, without significative differences.

**FIG.5.** The use of sanitary resources, both emergency department and hospitalary confinement, has significativement been diminished on both groups after de assignation of LAI.

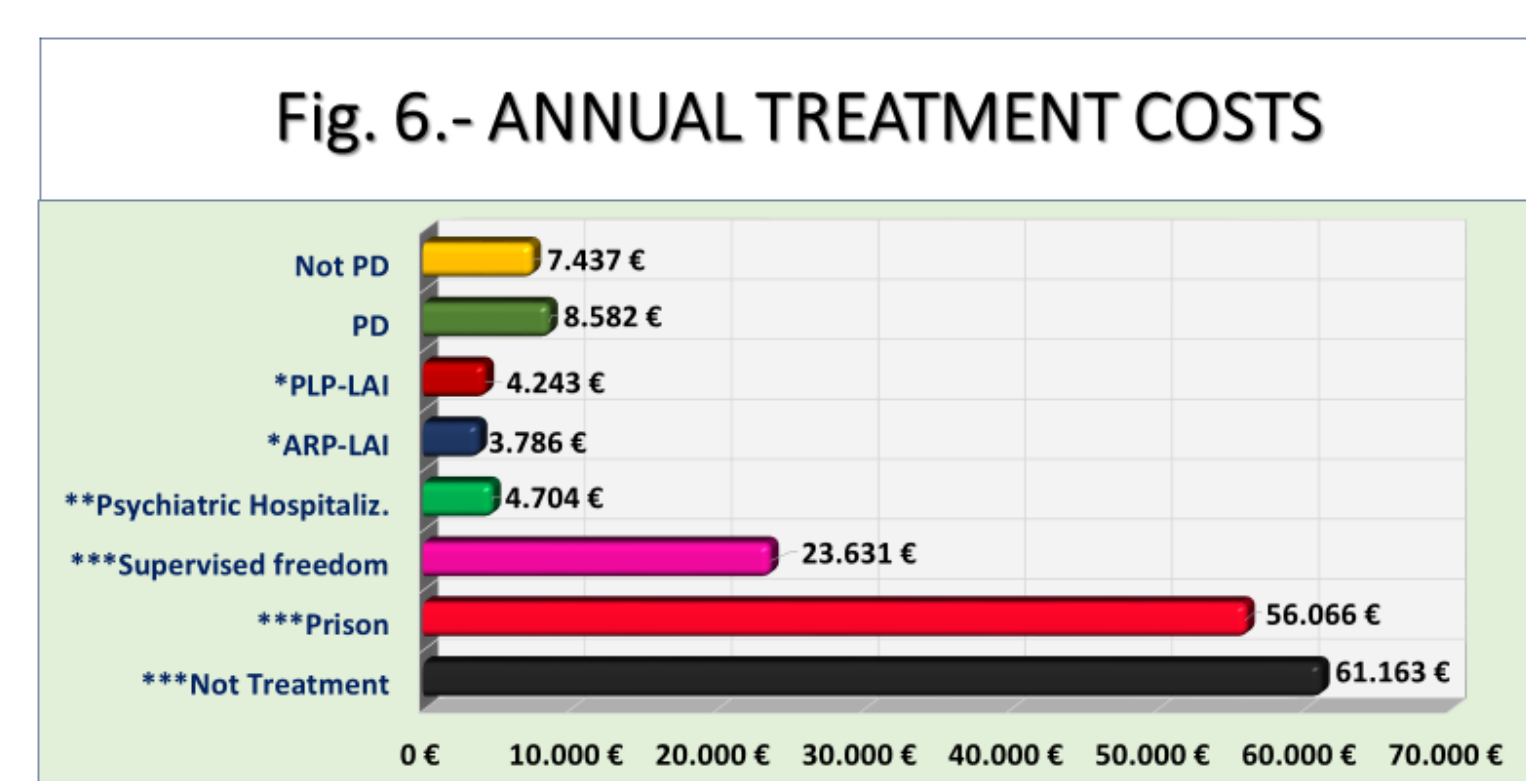
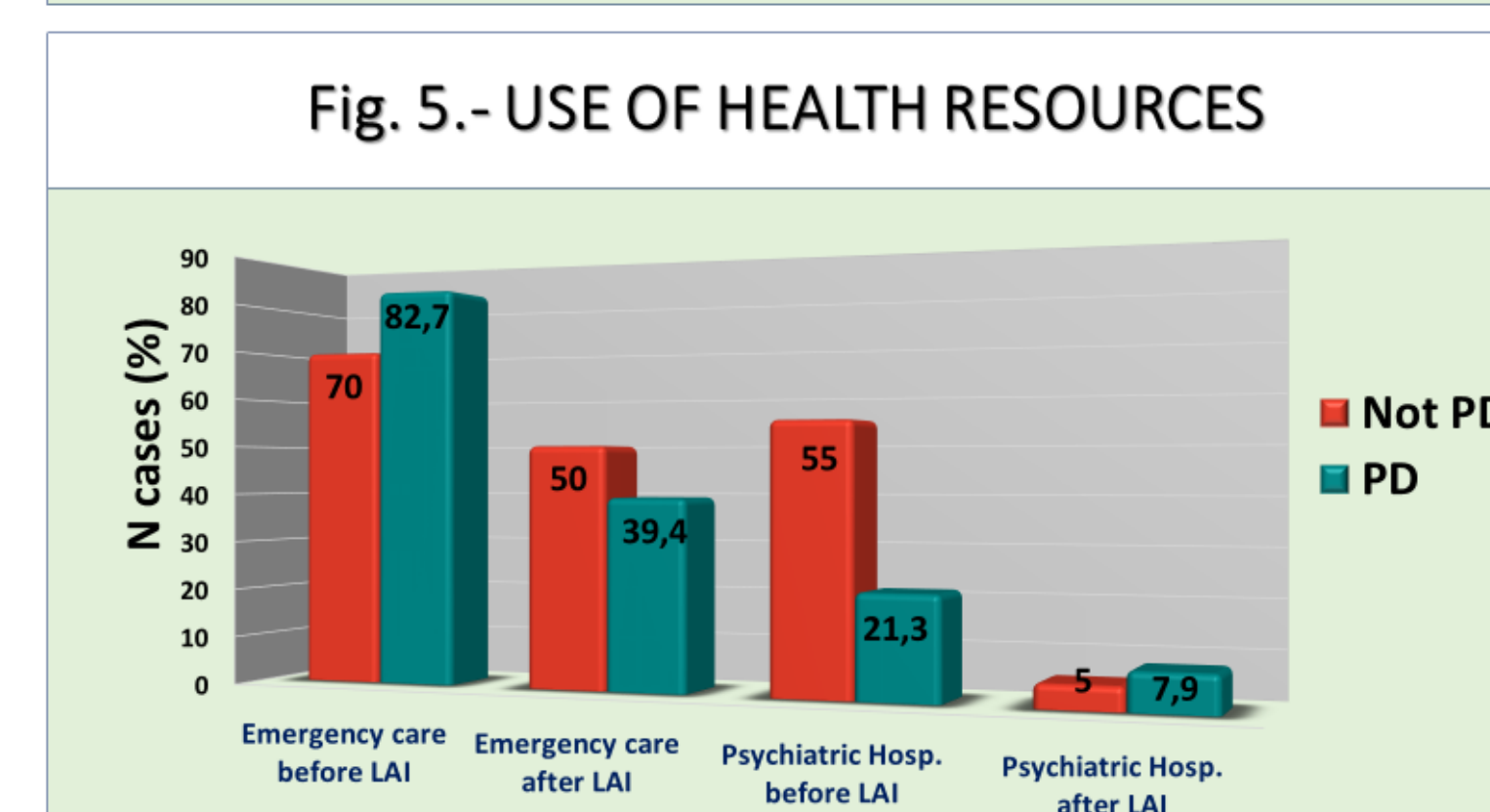
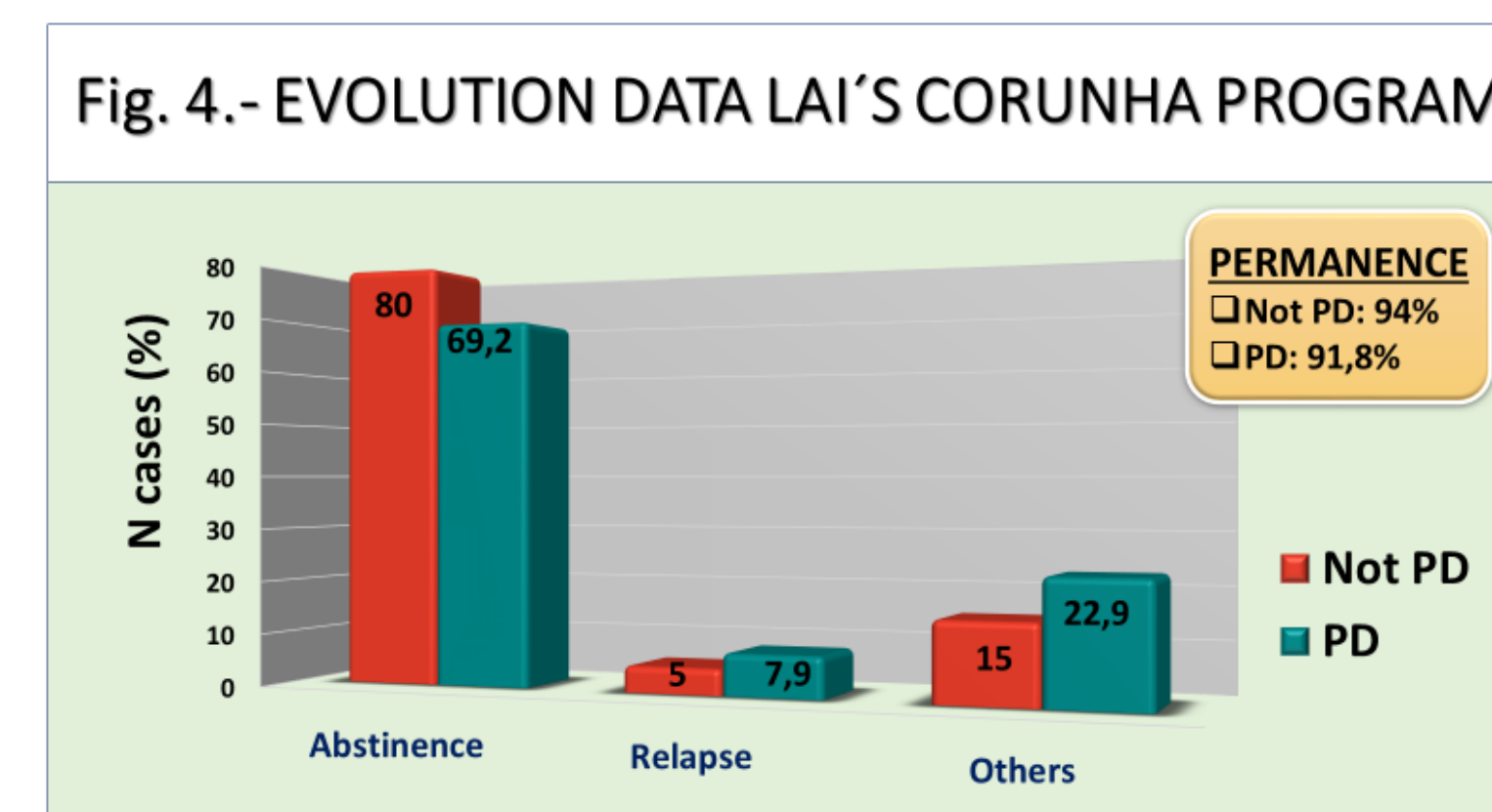
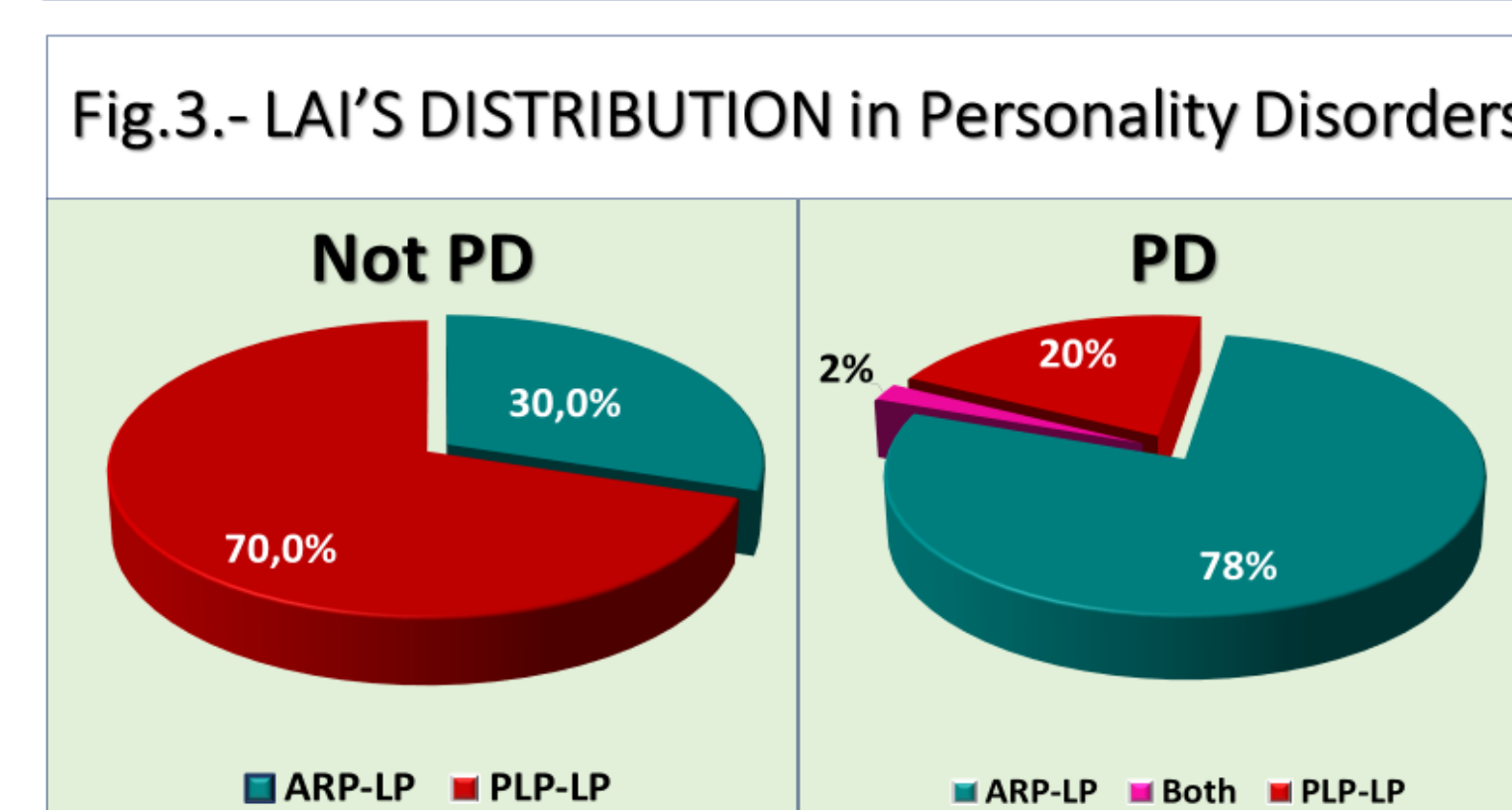
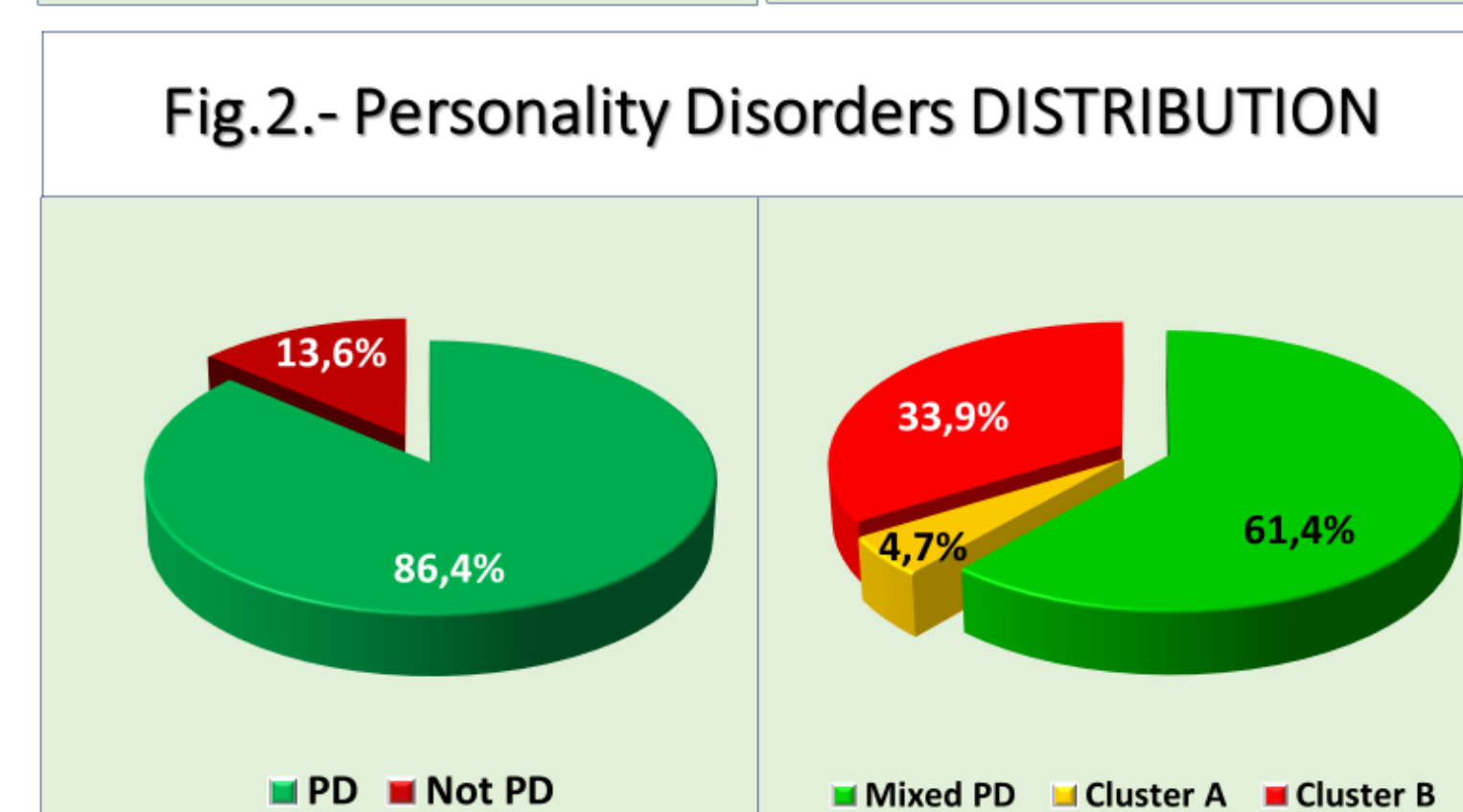
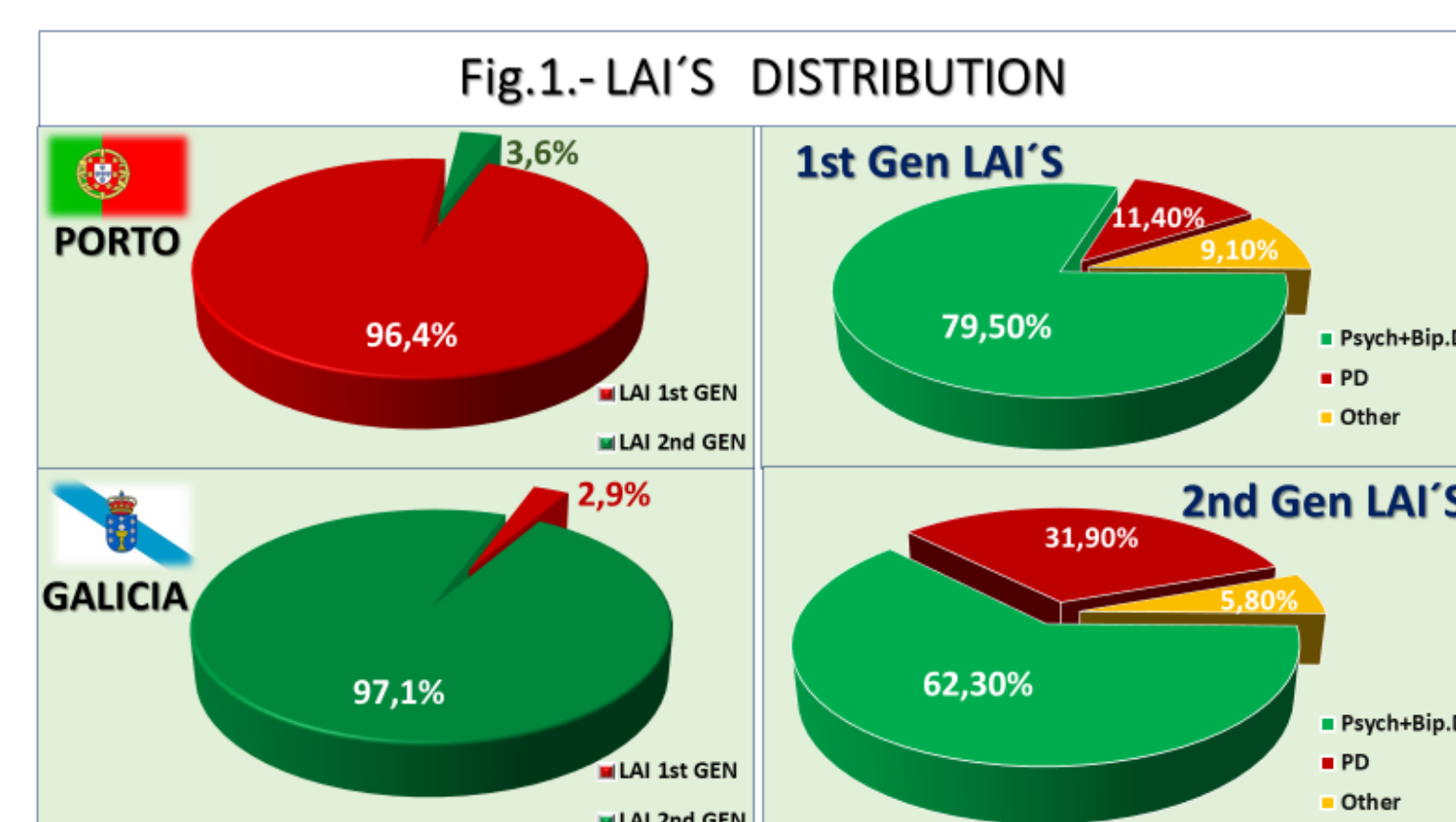
**FIG.6.** Dual patients are polimedicated (polipharmacy rate >85%), being the costs superior in the ones with associated PD, but the specific cost of the LAI treatment is les than the costs derived of the hospitalization, perpetration of crimes and/or no treatment.

**CONCLUSION:**

Our data supports efficiency and efficacy of the LAI approach in dual patients with associated PD, specially using ARP-LAI

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