Poster presentation

Clinical status course and quality of life after the first I year of treatment: greek results from the European Schizophrenia **Outpatient Health Outcomes (SOHO) study**

Charalambos Touloumis^{*1}, Vangelis Drossinos², Maria Kyrana², Kostas Ntzamaras², Fotini Sventzouri², Venetsanos Mavreas³ and Diego Novick⁴

Address: 1Psychiatric Hospital of Attica "Dafni", Greece, 2Medical Department of Clinical Research, Pharmaserve-Lilly, Greece, 3Department of Psychiatry, University Hospital of Ioannina, Greece and ⁴Eli Lilly and Company, Greece

* Corresponding author

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Background

European SOHO is a prospective, observational study of antipsychotic treatment in 10 European countries.

Materials and methods

Clinical effectiveness and Qol were assessed using the Clinical Global Impression (CGI) scale and the EQVAS instrument, respectively. The results that follow have been calculated by analysing treatment outcomes of SOHO patients who, from baseline to 12 months of follow-up, had only received the same monotherapy antipsychotic treatment (completers).

Results

Olanzapine-treated patients had higher benefit in overall CGI improvements (mean; 95% CI) during the first 12 months, compared with risperidone (2.51, 1.16-5.44), but not with quetiapine (1.16, 0.17-7.5) and oral typicals (1.6, 0.24–10.8)- treated patients.

Olanzapine-treated patients had no significant differences in EQVAS improvements during the first 12 months compared with other treatments.

Discussion

During the first 12 months of treatment olanzapine appears to have superior efficacy advantages compared with risperidone, but not with quetiapine or typical antipsychotics on clinical grounds. There was no differentiation between olanzapine and other typical and atypical antipsychotics regarding EQVAS score changes.

