Examining the Impact of Prescribing Long-Acting Injectable (LAI) at discharge compared to Oral antipsychotic medications on Re-admission at Eastern State Hospital

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BACKGROUND

- Schizophrenia Spectrum Disorders (SSD) are mental health challenges that present with positive (e.g., audio/visual hallucinations), negative (e.g., amotivation), and cognitive (e.g., impaired executive functioning) symptoms.1-2
- As compared to those with other mental illnesses, those with SSD have disproportionately higher prevalence of medical illnesses, greater mortality rates, and incur more healthcare costs.3-4
- Approximately 47.8-75.7% of individuals living with SSD meet the thresholds of adherence to oral antipsychotic treatment.5
- However, using Long-Acting Injectable (LAI) antipsychotics is associated with enhanced treatment adherence, reduced hospitalizations, decreased emergency department visits, and improved symptom remission.6-7

RESULTS

- On average, participants were 44 years of age, mostly male, white-non Hispanic, had a high school education or higher, lived in the metro areas, and were given a diagnosis of schizophrenia (Table 1).
- Those prescribed LAI at discharge were significantly more likely to have a diagnosis of schizophrenia than those on orals.

Table 1. Demographic characteristics of sample

<table>
<thead>
<tr>
<th></th>
<th>Total (N=707)</th>
<th>Oral (n=409)</th>
<th>LAI (n=298)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (Mean, SD)</td>
<td>44.0 ± 14.0</td>
<td>44.0 ± 14.0</td>
<td>42.0 ± 13.0</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>257 (36.4%)</td>
<td>155 (38.0%)</td>
<td>121 (41.2%)</td>
</tr>
<tr>
<td>Ethnicity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>543 (76.8%)</td>
<td>324 (79.0%)</td>
<td>219 (73.7%)</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than High School</td>
<td>130 (18.4%)</td>
<td>79 (19.1%)</td>
<td>52 (17.2%)</td>
</tr>
<tr>
<td>Rural Code</td>
<td></td>
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<tr>
<td>Metro</td>
<td>368 (52.1%)</td>
<td>200 (48.9%)</td>
<td>168 (56.4%)</td>
</tr>
<tr>
<td>SSD type</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Schizophrenia</td>
<td>393 (55.6%)</td>
<td>212 (51.8%)</td>
<td>181 (60.7%)</td>
</tr>
</tbody>
</table>

- Less than half of those with SSD who were discharged from the hospital were prescribed an LAI (see Figure 1).
- Individuals with schizoaffective disorder were significantly less likely to be prescribed an LAI at discharge compared to those with schizophrenia.

METHODS AND MATERIALS

- Design: Retrospective chart review using a two-group cohort design
- Sample (N=707):
  - Diagnosis of a schizophrenia or schizoaffective disorder
  - 18 years of age or older
  - Discharged with an antipsychotic medication
  - Obtained between January 1, 2018 to December 31, 2019
- Measures:
  - Demographics
  - Medication status (LAI vs. oral antipsychotic)
  - Antipsychotic type (1st vs. 2nd generation antipsychotic)
  - Readmission rates (% of patients readmitted in the specified time frames)
- Data analyses:
  - Chi-square and independent sample t-tests
  - Logistic regression analysis

purpose

To compare hospital readmission comparing individuals with SSD discharged on LAIs vs. orals. Specifically, we:

1) Examined the proportion of patients prescribed an LAI at discharge from ESH and,
2) Assessed differences in 30-day, 6-month, 1-year and 2-year re-admission rates among those prescribed an LAI as compared to an oral antipsychotic at discharge

REFERENCES