Introduction

- Schizophrenia affects approximately 1.1% or 2.7 million adults in the United States.
- Patients hospitalized for schizophrenia have among the highest 30-day readmission rates.
- Long-acting injectable antipsychotics (LAIs) have shown superiority over oral antipsychotics in preventing hospitalizations and readmissions among patients with schizophrenia.
- We found no studies about the impact of using one LAI versus another on hospital readmissions among patients hospitalized for schizophrenia.

Objective

To explore the impact of different long-acting injectable antipsychotics (LAIs) on reducing 30-day hospital readmission rates in patients with schizophrenia following their index hospitalization.

Methods

- Retrospective cohort study using the Premier Perspective Database™.
- Patient identification:
  - Hospitalized patients with primary diagnosis for schizophrenia during the study identification period between 01/01/2013 and 06/30/2015.
  - With ≥ 1 claim for one of the following LAIs during the hospitalizations:
    - Aripiprazole
    - Paliperidone
    - Haloperidol
    - Risperidone
    - Fluphenazine
  - Discharged to home or to a home care program
  - Index hospitalization: first admission
  - Index therapy: LAI therapy during index hospitalization
- Exclusion criteria:
  - < 17 years old during index hospitalization
  - ≤ 6 months of follow-up
- Outcome measure:
  - 30-day all-cause and psychiatric readmissions
- Statistical analysis:
  - Chi-squared or Fisher’s exact tests for dichotomous variables, and continuous variables.
  - Logistic regression conducted to examine the association between LAIs and risks of having 30-day all-cause and psychiatric-related readmissions.
  - Models adjusted for patient demographic and clinical characteristics.

Results

- Of the identified 89,119 hospitalized patients with schizophrenia, 15,286 (17.2%) were treated with LAIs: aripiprazole (n=2,032), haloperidol (n=573), paliperidone (n=2,676), or risperidone (n=3,173) (Figure 1).
- The mean (SD) age of the population of LAI users was 40.43 (13.48) years.
- The aripiprazole cohort was the youngest (Table 1).
- The unadjusted 30-day readmission rates were lowest in the aripiprazole cohort (all-cause: 9.7%, psychiatric-related: 8.7%) followed by haloperidol, paliperidone, risperidone, and fluphenazine (Figure 2).

Conclusions

- To our knowledge, this real-world study is the first to examine 30-day readmission rates among hospitalized schizophrenia patients treated with different LAIs.
- Compared with those treated with haloperidol, paliperidone, risperidone, and fluphenazine LAIs, patients treated with aripiprazole LAI had a numerically lower risk of being readmitted within 30 days, although the differences were not statistically significant.

References

3. Health Analytic Research, LLC, Beverly Hills, CA. 2015. Research funding for the study and this poster was received from Otsuka Pharmaceutical Development and Commercialization, Inc. and Lundbeck.
4. Greene and Stellhorn are employees of Otsuka Pharmaceutical Development and Commercialization, Inc., Princeton, NJ. Yan and Broder are employees of Partnership for Health Analytic Research, LLC, Beverly Hills, CA. Hartry is an employee of Lundbeck, Deerfield, IL. Funding for the study and this poster was received from Otsuka Pharmaceutical Development and Commercialization, Inc. and Lundbeck.

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