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SHORT COMMUNICATION

SURVEY ON SCREENING FOR METABOLIC SYNDROME PARAMETERS FOR PATIENTS ON ANTIPSYCHOTIC

TREATMENT IN AN ACUTE ADULT PSYCHIATRIC UNIT IN ENGLAND

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## INTRODUCTION

Metabolic syndrome is a cluster of disorders com- prising obesity, dyslipidaemias, glucose intolerance, in- sulin resistance and hypertension1. It helps identify indi- viduals at high risk of both type 2 diabetes and cardio- vascular disease (CVD)2. There is considerable evidence to show that patients prescribed antipsychotic drugs are at increased risk of developing Metabolic Syndrome3. It has been recommended to screen and monitor meta- bolic parameters to manage risk in this population4. This snapshot case note survey was carried out to evaluate the practice of screening for Metabolic Syndrome pa-

# Female 43%

Fig 1: Gender Distribution

### Ethnicity

# Male 57%

rameters for patients admitted to Berrywood Hospital who were prescribed antipsychotic drugs in January 2009.

## SUBJECTS AND METHODS

### Sample

40 patients admitted to acute adult psychiatric wards at Berrywood Hospital and receiving treatment with antipsychotic medications.

### Data collection

The data was collected on patients’ demograph- ics (age, gender and ethnicity), current antipsychotic medication, baseline recording of weight, height and Body Mass Index (BMI), fasting and random blood glu- cose levels, Serum Triglycerides, Cholesterol and HDL-C.

## RESULTS

The age range of the patient was from 18 to 73 years.

### Gender distribution

The total number of the patients in the sample was forty. Twenty three patients were male (57.5%) and sev- enteen female (43.5%). (Fig 1).

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36 (90%) patients were white, 1(2.5%) patient was of mixed heritage. 2(5%) patients were black and the ethnicity of 1 (2.5%) patient was not recorded. (Fig. 2).

White Mixed

Black or Black British Not recorded

Fig 2: Ethnicity

### Antipsychotic medication

22 (55%) patients were prescribed atypical anti- psychotics; of them 10(25%) were prescribed olanzapine and 12 (30%) patients were prescribed other atypical antipsychotics. 5(12.5%) patients were prescribed typi- cal antipsychotics and 13 (32.5%) patients were pre- scribed more than one antipsychotic. (Fig. 3).

Atypical Typical Polypharmacy

Fig 3: Antipsychotic Medication

### Metabolic syndrome parameters

2(5%) patients had their BMI recorded. 12(30%) patients had their weight recorded. 9(22.5%) patients had their height recorded. 34(85%) had their BP re- corded. (Fig. 4).

90%

80%

70%

60%

50%

40%

30%

20%

10%

0%

BMI

Weight

Height

BP

Fig 4: Metabolic syndrome parameter 1

12(30%) patients had their Blood sugar level re- corded. Fasting blood glucose was recorded in 5(12.5%) patients. Random blood glucose was recorded in 7(17.5%) patients. 11(27.5%) patients had their serum Triglycerides recorded. 9 (22.5%) patients had their se- rum Cholesterol recorded. No patients had their HDL-C recorded. (Fig. 5).

30.00%

25.00%

20.00%

15.00%

10.00%

5.00%

0.00%

FBSL

RBSL Triglyceridel Cholesterol HDL-C

Fig 5: Metabolic syndrome parameter 2

## DISCUSSION

This study revealed that 55% of the sample pa- tients were prescribed one atypical antipsychotics, most frequently olanzapine which is associated with substan- tial weight gain and the development of dyslipidaemia5. 32.5% of the sample patients were receiving more than one antipsychotic. Although baseline weight and height were recorded in 30% and 22.5% respectively.BMI was calculated for only 5% of the sample patients. The vast majority had their baseline BP recorded (85%). Blood glucose levels (random or fasting) were recorded for 30% of the sample patients. Serum Triglycerides and Cholesterol were recorded for 27.5% and 22.5% of the sample patients respectively. Significantly, no patients had their HDL-C recorded.

## CONCLUSION

The practice of screening for Metabolic Syndrome parameters for the in-patients prescribed antipsychotic medications was inadequate. Improving this practice would increase the chance of detecting and treating risk factors for cardiovascular disease and diabetes. Fol- lowing this survey, it was recommended that a checklist for Metabolic Syndrome parameters should be imple- mented.

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