

UNIVERSITI TEKNOLOGI MARA

**THE PROSPECTIVE STUDY OF PATTERN OF USE
OF SCHIZOPHRENIA MEDICATION IN
PSYCHIATRIC CLINIC**

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ABSTRACT

The aim of the study was to identify the drug prescribing patterns of psychotropic medications for schizophrenia patients at Hospital Tungku Ampuan Rahimah. The retrospective study was conducted in the outpatient pharmacy department. Data collection was based on psychiatric prescription that had been reviewed from 1 August 2008 to 31 August 2008. Out of 371 psychiatric prescriptions that have been reviewed, 200 cases of schizophrenia were included. The mean age was 35 (SD=1.131) years with a male to female ratio 2. The most widely used oral antipsychotic was haloperidol (20.5%). The most common depot preparation was zuclopenthixol decanoate (11%). The average antipsychotic daily dose prescribe in this clinic was found to be 342.06 mg equivalent of chlorpromazine. There was no difference between dose received by ethnic group (Malay, Chinese or Indian patients) and gender. However there was significance difference between dose antipsychotic drugs and age. Nearly 40 % of schizophrenia patients were prescribed atypical antipsychotic like clozapine, olanzapine, quetiapine and risperidone. Mostly the patients were on monotherapy (73%) and only 25.5 % of patients were on combination therapy. The study results show that conventional antipsychotic drug like haloperidol and chlorpromazine were commonly prescribed while the use of atypical drugs was minimal.

CHAPTER 1

INTRODUCTION

1.1 Background of study

Schizophrenia is a severe, lifelong brain disorder. People who have it may hear voices, see things that are not there or believe that others are reading or controlling their minds. In men, symptoms usually start in the late teens and early 20. The symptoms include hallucinations and delusions such as hearing voices. For women, the symptoms start in the mid-20 to early 30 of age. Other symptoms include unusual thoughts or perceptions, disorders of movement, difficulty in speaking and expressing emotion, problems with attention, memory and organization (Lieberman *et al.*, 2005).

The causes of schizophrenia were likely to be a combination of several different factors. These causes vary from individual. They may be caused by genetics, stress, street drugs, alcohol, brain damage, childhood deprivation or family problems. The aim of taking the medication was to reduce the effects of the symptoms on patients' life. This medication should weaken delusions and hallucinations gradually, over a period of a few weeks. It also helps the patient to think more clearly and to increase patients' motivation ability to look after themselves (Bebbington, 2001).