

Clinical Audit on the Measurement of Antipsychotic Side Effects using rating scales (GASS, LUNSERS, and SESCOAM) in community settings

OLUSEGUN SODIYA, ADEWOLE ADEGOKE, GEANINA ILINOIU, CLARE MORGANS

Tees, Esk and Wear Valleys NHS Foundation Trust, County Durham, UK.

AIM

This clinical audit aimed to assess if the monitoring of side effect of antipsychotics is adhered to using the Trust and National institute of clinical excellence (NICE) guidelines.

BACKGROUND

One of the determinants of prognosis in schizophrenia is adherence to medications. Several patients during episodes of relapse or while recovering on the ward have stated that experience of adverse side effects were the main reasons for defaulting on their medications. It highlights the significance of a collaborative approach between professionals and patients about the benefits and risks of antipsychotics [1]. The recommended monitoring scales are Glasgow antipsychotic scale, Liverpool University neuroleptic side effect rating scale, and side effects scale for antipsychotic medication [2].

METHODOLOGY

The audit was conducted from March 30th, 2021 to April 30th 2021 using a random sampling technique to select 50 patients on the caseloads of two community mental health teams within South Durham. The data was collected with a tool designed using NICE guidelines on the management of psychosis and, schizophrenia(CG178) and the trust policy document on monitoring of psychotropic medications [1,3].

RESULTS

In all the selected patients, no rating scales were used to assess their side effects at three months or after one year of commencement of antipsychotics. However, there was documented review of side effects written as case notes in 96% of patients. The side effects on case notes included extrapyramidal side effects in 96% of patients, sexual side effects in 72% of patients, and menstrual irregularities(females under 50) in 18% of patients. We also noted that EPSE was the most documented of the side effects.

CONCLUSION

This audit showed a significant gap in the measurement of side effects of patients on antipsychotics as none of the recommended rating scales were used in the selected service users. The reviews of side effects were carried out in a random pattern rather than the suggested timeline of three months and one year by the guidelines. We also noted that the documented sexual side effects were not well explored and this may be due to sensitive nature of the topic. Hence the use of a rating scale could have elicited a better response. Given our findings, there is a need for the Trust and NICE guidelines to be adhered to in the monitoring of side effects of antipsychotics as this is likely to have a positive impact on compliance to medications by service users.

REFERENCES

1. <https://www.nice.org.uk/guidance/cg178/resources/psychosis-and-schizophrenia-in-adults-prevention-and-management-pdf-35109758952133>.
2. Waddell L, Taylor M. A new self-rating scale for detecting atypical or second-generation antipsychotic side effects. *J Psychopharmacol*. 2008 May;22(3):238-43. doi: 10.1177/0269881107087976. PMID: 18541624.
3. TEWV document "Guidance on the Use of High Dose Antipsychotic Treatment (HDAT)" for the enhanced monitoring requirements for HDAT.