Author's response to reviews

Title: Non-adherence to antipsychotic medication, relapse and rehospitalisation in recent-onset schizophrenia.

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Version: 4 Date: 4 February 2008

Author's response to reviews: see over
Dear Editor

RE: Non-adherence to antipsychotic medication, relapse and rehospitalisation in recent-onset schizophrenia. MS: 8716548821551910

We hereby resubmit our manuscript in response to your wish for a rapid receipt of a revised version.

The subjects of study were relapse, hospital admissions and application of treatment by coercion among patients with recent onset schizophrenia being adherent and non-adherent to anti-psychotic medication.

The main conclusions are that non-adherence was associated with relapse, hospital admission and having persistent psychotic symptoms compared to adherent patients in a prospective study.

Few reports have established such an association in prospective studies in recent onset schizophrenia.

We would like to thank you for the helpful comments from your referees and refer you to the enclosed list of changes keyed to the referees’ comments.
Yours sincerely

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Reviewer 1.: The question of differentiating between those who received first and second generation medications. Although most prior studies have not found substantial differences in adherence between the two general classes, the distinction remains of interest -particularly for patients early in the course of their illness.

Answer: The text “Good adherence was found in 19 of 29 patients that anytime during the trial received oral first generation antipsychotics, 10 of 12 patients that anytime during the trial received second generation antipsychotics and 12 of 16 patients receiving clozapine (ChiSqu = 1.44 df = 2, p = 0.5). Among patients with only one medication during the whole trial, good adherence was found in 11 of 17 receiving oral first generation antipsychotics, 3 of 4 receiving second generation antipsychotics and 5 of 7 receiving clozapine (ChiSqu = 0.21 df = 2, p = 0.9).” has been included in the result section. (Page 11, paragraph 1)
Reviewer1. And the issue of distinguishing those who receive depot medications as opposed to oral agents. Although depot agents cannot assure adherence, assessing adherence for patients who receive depots is far simpler since non adherence can be defined by missing injections. Thus assessment of adherence should distinguish these two situations as suggested by the earlier review.

Answer: A description of adherence among depot users and the results of changing from oral to depot and vice versa are added in the text: “Among the 12 patients receiving depot antipsychotics, 8 were treated with depot when included in the study. Of these 8, 2 used depot the whole period with good adherence, 2 had good adherence to depot, changed to oral antipsychotics with bad adherence and 4 had good adherence to depot, changed to oral with good adherence. Four patients used oral antipsychotics when included, had bad adherence and changed to depot antipsychotics with good adherence.” has been included in the result section. (Page 12, paragraph 2)