

Depot Antipsychotic Use in New York State Hospitals, 1994 to 2009

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Depot neuroleptics have been in use in the United States since 1963, when fluphenazine enanthate was approved for marketing. The depot form's guaranteed delivery eliminates covert noncompliance and should lead to greater effectiveness. In the inpatient setting using depot medication administration could save staff time and avoid daily medication administration struggles. Our study determined whether the utilization rate for individual depot antipsychotics changed from 1994 to 2009 for patients hospitalized in the psychiatric centers operated by the New York State Office of Mental Health.

Data were from our Integrated Research Database (1), which contains prescribing information for all adult nonforensic inpatients. We examined quarterly data from January 1994 through June 2009 for all patients receiving antipsychotic medication (N=9,785 for the first quarter of 1994 and N=4,509 for the second quarter of 2009). Approximately 80% of these patients had a diagnosis of schizophrenia or schizoaffective disorder.

Figure 1 shows the percentage of patients receiving prescriptions for depot fluphenazine, haloperidol, or

risperidone, by length of hospital stay— ≤ 360 days (excluding new admissions in the quarter) or >360 days. The introduction of depot risperidone did not result in a decrease in the utilization rate of depot haloperidol. Although rates of depot utilization appear higher for patients with lengths of stay of less than one year than they are for patients whose lengths of stay are greater, this can be influenced by differences in age, ethnicity, gender, and psychiatric diagnosis. Higher rates among shorter-stay patients may also be related to discharge planning efforts where future adherence to antipsychotic medication is a clinical concern. However, rates of depot utilization were not negligible for the long-stay patients where discharge is not imminent.

In the aggregate, the percentage of patients receiving any depot antipsychotic has ranged over the years from

21.2% (first quarter of 1999) to 34.1% (third quarter of 2008). Whether depot antipsychotics are a useful treatment strategy for hospitalized patients receiving intermediate or long-term care cannot be answered by utilization data alone. There is a need for prospective studies that examine psychopathology and functional outcomes in this population.

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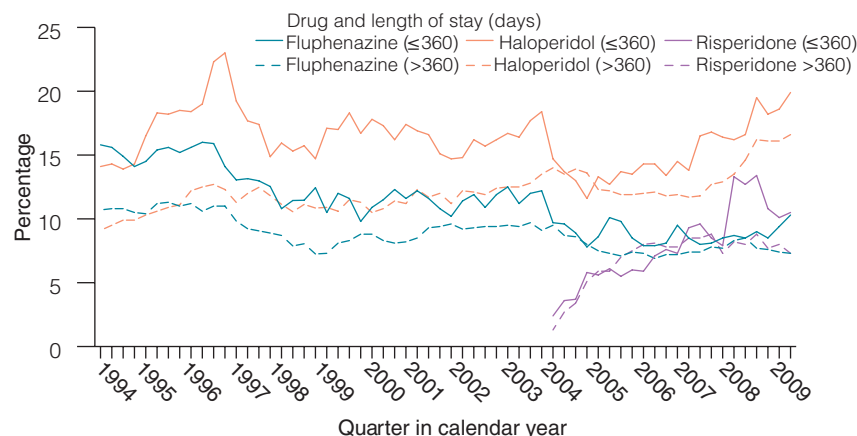
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Figure 1

Percentage of inpatients in New York State psychiatric hospitals who received at least one prescription for a depot antipsychotic medication, by calendar quarter and by length of hospital stay



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