

4036981 PYCP/M : MAJOR: CLINICAL PHARMACY; M.Sc.in Pharm.
(CLINICAL PHARMACY)
KEY WORDS : FIRST-EPIISODE / SCHIZOPHRENIA /
SCHIZOPHRENIFORM DISORDER / RISPERIDONE /
HALOPERIDOL

SUTTIPONG CHINKRUA: EFFICACY AND SAFETY OF
RISPERIDONE VERSUS HALOPERIDOL IN FIRST-EPIISODE SCHIZOPHRENIC
THAI PATIENTS. THESIS ADVISORS: CHUTHAMANE SUTHISISANG,
Ph.D., UMPAIKANIT SAMANWONGTHAI, M.D., SANTICHAI
CHAMCHITCHUN, M.D. 85 p. ISBN 974-663-160-8

The objective of this study was to evaluate efficacy and safety of atypical antipsychotic drug, risperidone, in comparison with typical antipsychotic drug, haloperidol, in first-episode schizophrenic Thai patients. This single blind, prospective 24-week clinical study was performed with 22 patients from Srithunya Hospital. Patients were randomly assigned to the treatment with either 2-6 mg of risperidone (N=11) or 10-40 mg of haloperidol (N=11) daily. Outcome measurements were efficacy assessed by the Positive and Negative Syndrome Scale (PANSS) and side effects especially extrapyramidal symptoms (EPS) evaluated by the Extrapyramidal Symptom Rating Scale (ESRS).

There were significant reduction in PANSS total scores, positive, negative, and general psychopathology scores in both groups when compared to the baseline ($p < 0.05$). However, there was no statistical difference between risperidone and haloperidol. Defining a responder as a patient with at least a 20% reduction in PANSS total scores, the response rate at week 8 was 81.8% for risperidone and 66.7% for haloperidol ($p = 0.29$). It was found that risperidone 3.5 ± 1.8 mg/day was as effective as haloperidol 12.6 ± 10.3 mg/day in the treatment of first-episode schizophrenia.

Considering the side effects during the 24-week follow-up periods, risperidone-treated patients experienced a higher incidence of drowsiness and tremor whereas haloperidol-treated patients had a higher incidence of acute dystonia and sialorrhea. Weight gain, which was a side effect limitation of both risperidone and haloperidol, may lead to loss of self-esteem in patients and result in noncompliance with the medication. Other significant adverse effects that occurred with the test medications were; 1) erectile dysfunction and irregular menstruation in risperidone group, and 2) galactorrhea in haloperidol group. These undesirable effects also contributed to noncompliance and have long-term consequences on morbidity.

The results suggest that risperidone and haloperidol were effective in the treatment of first-episode schizophrenia and risperidone had a benefit profile superior to that of haloperidol based on a lower incidence of acute dystonia.