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## Research Article

## Comparison of Efficacy and Safety between Long-Acting Injectable Antipsychotic Monotherapy and Combination of Long-Acting Injectable and Oral Antipsychotics in Patients with Schizophrenia

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Background. Long-acting injectable (LAI) antipsychotics are used as a monotherapy in patients with schizophrenia. However, the combination of LAI and oral antipsychotics is commonly used in clinical practice, despite there being very limited studies investigating the efficacy and safety of this combination compared with LAI antipsychotic monotherapy. Objective. To study the efficacy and safety of LAI antipsychotic monotherapy compared with the combination of LAI and oral antipsychotics in patients with schizophrenia. Methods. This study was a retrospective cohort study, which classified eligible patients into two groups: the LAI antipsychotic monotherapy group and the combination of LAI and oral antipsychotic group. The primary outcome was hospitalization between groups. The duration of the study was 2 years. Results. In total, 86 patients completed the study and were analysed (LAI antipsychotic monotherapy group: n = 25; combination of LAI and oral antipsychotic group: n = 61). There was no significant difference in hospitalization between the two groups (P = 1.000). For other outcomes, there were also no significant differences in both all-cause discontinuation (P = 0.667) and adverse drug reactions (P = 0.732) between the two groups. Conclusion. The efficacy and safety of LAI antipsychotic monotherapy appeared similar to the combination of LAI and oral antipsychotics in patients with schizophrenia. Therefore, the combination of LAI and oral antipsychotics, which is commonly used in clinical practice, may not be necessary.

## 1. Introduction

Schizophrenia is a chronic psychiatric disorder that impairs many aspects of functional outcomes, including social and vocational functioning. Symptom domains of schizophrenia comprise heterogeneous conditions, including positive, negative, cognitive, and affective symptoms [1]. Oral antipsychotics represent the main pharmacological treatment and require long-term use to reduce the risks of relapse and rehospitalization [2]. However, nonadherence to oral antipsychotics is a major and serious problem,

which is found in 40–50% of patients with schizophrenia [3]. Nonadherence to oral antipsychotics causes deleterious consequences, including relapse, rehospitalization, longer time to remission, and risk of suicide and substance use. With each relapse, recovery can become slower and less complete, finally leading to the deterioration of the social functioning and living status of patients with schizophrenia [4, 5].

Long-acting injectable (LAI) antipsychotics are an effective treatment strategy in patients with poor adherence to oral antipsychotics, and these medications are used to improve

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