# O-54 - RISK OF NEW-ONSET DIABETES AFTER LONG-TERM TREATMENT WITH CLOZAPINE IN COMPARISON TO OTHER ANTIPSYCHOTICS IN PATIENTS WITH SCHIZOPHRENIA

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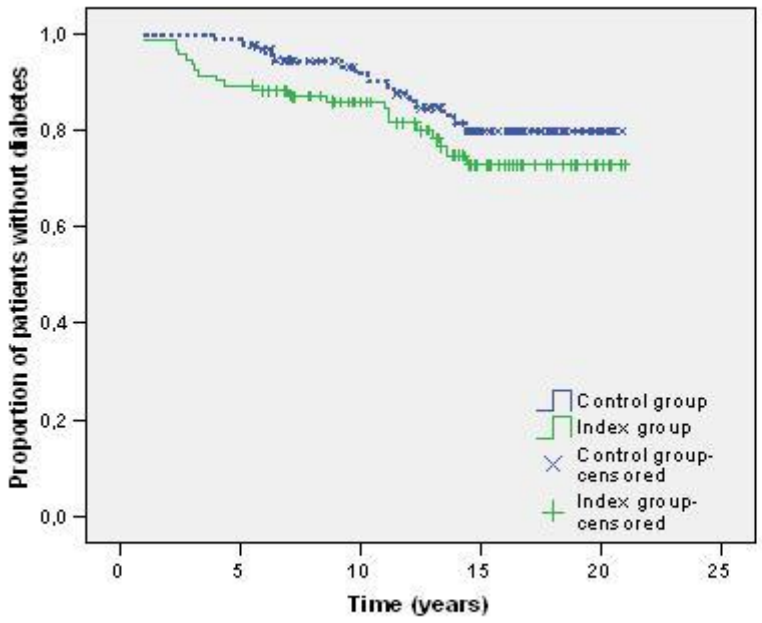
**Methods:** Adult patients with schizophrenia or schizoaffective disorder who had been treated with clozapine for 5 years or longer were eligible to participate in the study (index group). The end point of observation was death, loss to follow-up or 1 January 2010. The control group consisted of patients never treated with clozapine, matched on age, diagnosis and gender.
**Results:** During the study period we identified 94 patients in each group. The mean follow-up in the index and control group was 12.3 and 13.5 years respectively. The vast majority of patients continued clozapine until the end of the follow-up period (mean duration of therapy: 10.7 years). The cumulative incidence of diabetes in the clozapine group was 22.3% compared to 16.0% in the control group (NS). The absolute risk difference was 6.3% (95%CI: -4.9% to 17.5%). The hazard ratio for time to new-onset diabetes was 1.54 (95%CI: 0.80-3.00) (see Fig 1 for Kaplan-Meier curve).
**Discussion:** To the best of our knowledge, this study has the longest follow-up of a sizeable cohort of clozapine users in comparison to matched controls. The absolute risk difference was 6.3% and not significant despite an adequate power and extended follow-up of more than 13 years. Our result is in agreement with four randomized studies with a follow-up varying from 14 weeks up to 9 years. A case-control study matched 7,227 cases of newly treated diabetes by year of birth and gender to 6,780 controls and found no significant association between the incidence of new-onset diabetes and clozapine.




*[Kaplan-Meier curve: time to new-onset diabetes]*



https://doi.org/10.1016/S0924-9338(12)74154-8 Published online by Cambridge University Press