

Presentations



Reconsideration of antipsychotic polytherapy for schizophrenia -Pharmacotherapy in the era of BAMM-

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Career

Education

Residency Kansai Medical University, Osaka (2003 -2004)
Medical degree Kansai Medical University, Osaka (1997 -2003)

Job History:

2005-2009: Research Fellow, Department of Neuropsychiatry, Kansai Medical University.
2009-2011: Lecturer, Department of Neuropsychiatry, Kansai Medical University.
2011-2016: Research Associate, Department of Neuropsychiatry, Kansai Medical University.
2013: Acquisition of the doctoral degree of medical science (Ph.D.).
2014-2016: Research Fellow, Department of Neuropsychiatry, University of Bologna.
2017-2020: Assistant Professor, Department of Neuropsychiatry, Kansai Medical University.
2020-2021: Associate Professor, Department of Neuropsychiatry, Kansai Medical University Medical Center.
2021-present: Associate Professor, Department of Neuropsychiatry, Kansai Medical University.

Scholarships, fellowships, and other academic distinctions:

2011: Winner of the fellowship award of 2th congress of the Asian College of Neuropsychopharmacology
2013: Winner of the Eli Lilly Fellowship for Clinical Psychopharmacology
2016: Winner of the Jijin-kai Fellowship
2016: Winner of the PCN reviewer award
2016: Winner of the Prize for Encouragement of the society, the Japanese Society of Clinical Neuropsychopharmacology
2017: Winner of the Toshiko Kitanishi award of alumni association, Kansai Medical University.

Abstract

Relapse is considered the most significant problem in the maintenance phase of schizophrenia because it leads to decreased treatment response and general functional decline. Treatment with antipsychotic drugs (APDs) is known to prevent relapse, but poor adherence to APDs often causes relapse. Recently, long-acting injectable antipsychotics (LAIs) have emerged as a formulation that reduces the risk of relapse and have become one of the gold standards for maintenance therapy. However, it has been found that there are approximately 20%/year of schizophrenia who relapse despite adherence assured by LAI, and these are referred to as 'Breakthrough Psychosis on Antipsychotic Maintenance Medication' (BAMM).

Although the pathology and predictive factors of BAMM are not yet fully understood, abnormalities in striatal functional connectivity and a high incidence of early onset of LAI have been reported. Furthermore, information on therapeutic approaches to BAMM is extremely inadequate. Some guidelines recommend increasing the dose of the same oral medication as the LAI. However, when antipsychotic use has already reached the upper limit or when LAI specifications are limited, it is difficult to deal with the problem by increasing the dose. In this presentation, I will provide some personal observations and discuss the results of clinical trials that suggest new possibilities for the treatment of BAMM.