

Physical health monitoring of patients attending a clozapine clinic in a tertiary hospital

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Introduction

Clozapine is the antipsychotic of choice for patients with treatment-resistant schizophrenia. However, this medication carries a large burden of adverse effects, including metabolic syndrome. The Maudsley have set out guidelines which recommend that those who have been established on clozapine treatment for one year should have at least annual monitoring of weight, BMI, waist circumference, lipid profile and fasting glucose (FG) or HbA1c. The aim of our audit was two-fold; to measure compliance rates of physical health monitoring of patients on clozapine against the gold standard of the Maudsley guidelines, and to design an intervention to improve our compliance.

Methods

All patients attending the clozapine clinic, who had been on clozapine for more than twelve months, were included. The initial audit took place in October 2020 and medical monitoring for the preceding 12 months was measured. Reviews of both the electronic patient record (EPR) and paper files were undertaken to determine if physical health parameters had been measured.

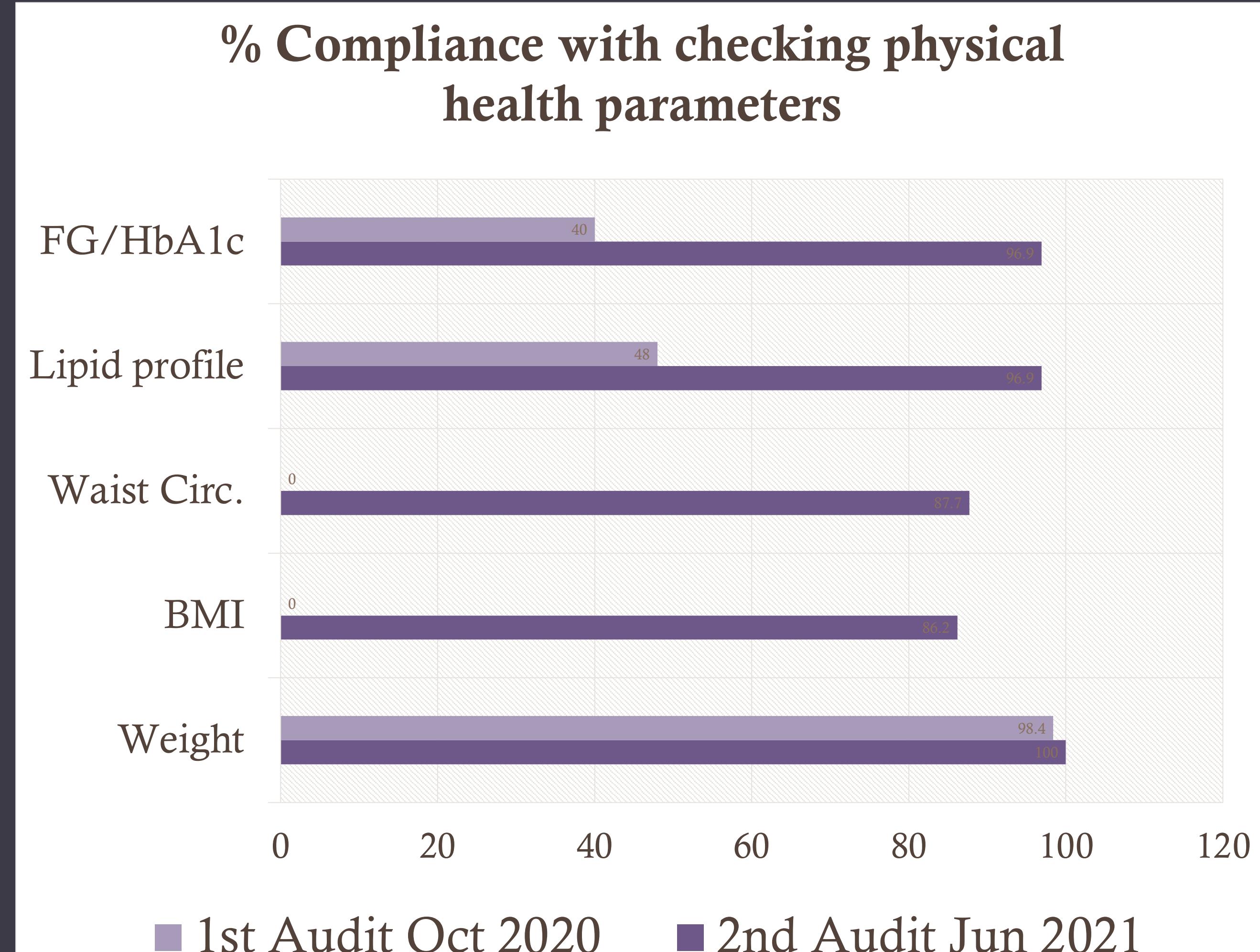
Following this initial audit three interventions were implemented; an education session for NCHDs was provided, an annual clozapine physical health clinic run by NCHDs was introduced and a physical health monitoring tool was designed to record results of investigations over time. The re-audit took place in June 2021.

Fig 1. Physical health monitoring tool which was introduced for each patient on clozapine.

Results

64 patients were included in the first audit, and 65 in the second audit. The comparison of results are displayed in the table and bar chart shown below, and to the right respectively.

	Weight N (%)	BMI N (%)	Waist Circ. N (%)	Lipid Profile N (%)	FG/ HbA1c N (%)
1 st Audit (N=64)	63 (98.4%)	0 (0.0%)	0 (0.0%)	31 (48.0%)	26 (40.0%)
2 nd Audit (N=65)	65 (100%)	56 (86.2%)	57 (87.7%)	63 (96.9%)	64 (96.9%)



Conclusions

The interventions introduced helped to significantly improve our compliance rates with physical health monitoring of clozapine patients. The continuation of the annual monitoring clinic, as well as the use of the physical health monitoring tool is recommended to ensure these improved compliance rates are sustained. The appointment of a clinical lead (e.g. a permanent, senior member of medical staff) is also recommended to ensure policies are implemented and to provide clinical oversight for this vulnerable cohort of patients.

References

- ¹Taylor, D. M., Barnes, T. R. E., & Young, A. H. (2018). *The Maudsley prescribing guidelines in psychiatry* (13th ed.). John Wiley & Sons

Declarations

Permission was granted by the relevant clinical director to carry out this audit and to present these results.