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AN EPIDEMIOLOGICAL STUDY OF CONCOMITANT USE OF HERBAL MEDICINE AND ANTIPSYCHOTICS IN SCHIZOPHRENIC PATIENTS: IMPLICATION FOR HERB-DRUG INTERACTION

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School of Chinese Medicine, The University of Hong Kong, Hong Kong, Hong Kong S.A.R. Herb-drug interactions are an important issue in drug safety and clinical practice. The aim of this epidemiological study was to characterize associations of clinical outcomes with concomitant herbal and antipsychotic use in patients with schizophrenia. A total of 1795 patients with schizophrenia who were randomly selected from 17 psychiatric hospitals in China were interviewed face-to-face using a structured questionnaire. Association analyses were conducted to examine correlates between Chinese medicine (CM) use and demographic, clinical variables, antipsychotic medication mode, and clinical outcomes. The prevalence of concomitant CM and antipsychotic treatment was 36.4% [95% confidence interval (95% CI) 34.2%-38.6%]. Patients using concomitant CM had a significantly greater chance of improved outcomes than non-CM use (61.1% vs. 34.3%, OR=3.44, 95% CI 2.80-4.24). However, a small but significant number of patients treated concomitantly with CM had a greater risk of developing worse outcomes (7.2% vs. 4.4%, OR=2.06, 95% CI 2.06-4.83). Significant predictors for concomitant CM treatment-associated outcomes were residence in urban areas, paranoid psychosis, and exceeding 3 months of CM use. Herbal medicine regimens containing *Radix Bupleuri*, *Fructus Gardenia*, *Fructus Schisandrae*, *Radix Rehmanniae*, *Akebia Caulis*, and *Semen Plantaginis* in concomitant use with quetiapine, clozapine, and olanzapine were associated with nearly 60% of the risk of adverse outcomes. Our study suggests that concomitant herbal and antipsychotic treatment could produce either beneficial or adverse clinical effects in schizophrenic population. Potential herb-drug pharmacokinetic interactions need to be further evaluated.