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METABOLIC SYNDROME IN SCHIZOPHRENIA -IMPACT OF ANTIPSYCHOTIC MEDICATION

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Metabolic syndrome generally includes some or all of the following: elevated blood pressure, abdominal obesity, diabetes or "prediabetes" (impaired glucose tolerance, impaired fasting glucose or insulin resistance), dyslipidemia (high levels of triglycerides and/or HDL), and inflammatory markers.

P.S . a 34 year old , diagnosed with Paranoid schizophrenia. The patient comes from a disorganised family. The disease started at 18 years with psychotic symptoms - delirious, psychotic behavior, aggression, neglect of personal hygiene. He received almost continuous antipsychotic medication. In recent years received the second generation antipsychotic medication. Under this medication increased weight reaching 160 kg in weight. The most significant weight gain occurred in recent years under neuroleptic medication with clozapinum. Hypertension (max 200/120) appeared as a complication of increased weight , requiring antihypertensive medication. Has not other endocrine problems. Laboratory values increased cholesterol, triglyceride, and lipid. Glycemia remained normal. In the last six months patient received amisulpiridum 800mg/day. In same conditions of life the patient has lost 40 kg in weight reaching 140 kg. Family history- mother obesity and HTA;Weight and (BMI) initially 160kg/180cm then 120 kg/180cm;Waist circumference 140CM;Blood pressure initially 200/120 mm Hg then160 /110mmhg;Fasting lipids increased,glucose normal

Conclusion: Assessment of risk factors is necessary before prescription of antipsychotics. Especially weight,BMI,family history for obesity, and ethnicity should be evaluated. People taking antipsychotics that increase the risk of MetS should be educated on this subject. They should be advised about their diet and lifestyle, about how to recognize symptoms of MetS and its consequences.