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The place for early use of long acting injectables in managing schizophrenia: An Australian clinician's experience and viewpoint

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Injectable medications have often been viewed as a last resort or when definitive non-adherence is clearly apparent. Debates about treatment resistance or resistance to treatment can delay the pragmatic need to discuss injections as an option. The consideration of injectables early in the course of the illness ensures effective treatment and in many cases a paradoxical opportunity to engage the patient, bring back control of the situation, reduce symptoms and restore/improve cognition. This can then be seen as a positive response to managing a difficult illness instead of the step of failures in moving away from oral medications that have been ineffective for whatever reason. In this presentation, there will be an historical summary of schizophrenia treatments followed by the case for injectables. Case studies will illustrate the options for treatment at a number of illness stages.

Biography

Peter Norrie has held clinical management positions since 2002 and is currently the Chief Psychiatrist and Director of Clinical Services for Mental Health, Justice Health and Alcohol & Drug Services, ACT Health. In addition, he is an Adjunct Associate Professor of Psychiatry at The Australian National University Medical School and is a jurisdictional Member of the Safety and Quality Partnership Standing Committee of the Australian Health Ministers' Advisory Council. (This committee launched the National Mental Health Recovery Framework in 2013). He is an ACT and bi-national representative on a number of committees for the Royal Australian and New Zealand College of Psychiatrists. He has clinical and research interests in schizophrenia and psychopharmacology. He has also focused on support for international medical graduates and education and training for colleagues, registrars and general practitioners.

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