SCHIZOPHRENIA AFFECTS A PATIENT’S ENTIRE ENVIRONMENT

1 patient with diagnosed schizophrenia

there are 10 persons affected in their immediate environment

CAREGIVER PROFILE

<table>
<thead>
<tr>
<th>Relationship with a Patient</th>
<th>Professional Activity</th>
<th>Financial Support Provided by Caregivers to Their Relatives</th>
<th>Of Caregivers Cover Part of Patients’ Costs</th>
<th>Of Patients Live with Their Caregivers</th>
</tr>
</thead>
<tbody>
<tr>
<td>46% a parent</td>
<td>68% a worker</td>
<td>72% on average PLN 569 per month</td>
<td>81%</td>
<td>88%</td>
</tr>
</tbody>
</table>

REFERENCES

SCHIZOPHRENIA AFFECTS MAINLY YOUNG PEOPLE

50mn affects over 50 people worldwide, according to estimates, the number of patients in Poland may amount to as much as 385,000. 1/2 of them being non-diagnosed patients.

PATIENT PROFILE

- **marital status**: 55% single
- **age**: aged 43 (on average)
- **first symptoms**: at the age of 29 years (on average)
- **education**: 56% secondary school
- **medical diagnosis**: 3 years (on average)

MOST PATIENTS LOSE THEIR JOBS DUE TO SCHIZOPHRENIA

- **employment status**: 61% disability pension
- **before diagnosis**: 65% employed (on average)
- **after diagnosis**: 15% employed, 85% unemployed

PATIENT PROFILE

AFFECTS MAINLY YOUNG PEOPLE

- suicide is a cause of death in 5-10% of schizophrenic patients
- there are relatively many patients suffering from other chronic diseases
- patients have an increased risk of cardiovascular and respiratory diseases

EACH PATIENT IS DIFFERENT AND NEEDS AN INDIVIDUAL THERAPY

Schizophrenia treatment requires a comprehensive approach inclusive of pharmacotherapy, psychoeducation, psychotherapy, and activity-based therapy. Administration of antipsychotic drugs in a form of LAIs:

- reduces the risk of hospitalization by more than 60%
- reduces anxiety in schizophrenic patients’ environment and improves life quality of their caregivers by removing the need for reminding patients of drug use on a daily basis
- allows distinguishing between lack of response to a specific drug and lack of response caused by non-systematic daily administration of oral drugs

Antipsychotic drugs are administered to patients in a form of LAIs in various organizational entities of healthcare system (such as mental health out-patient clinics, psychiatric doctor’s offices, psychiatric wards and day-care departments, community mental health services), giving patients the opportunity to be treated within their own environment and providing a greater sense of independence and control over the disease and their own lives. This form of treatment reduces a stigma of schizophrenic patients.

Long-acting injections of antipsychotic drugs represent one of the most effective strategies of preventing schizophrenia recurrences.

DOCTOR-PATIENT RELATIONSHIP

Doctor-patient relationship is a crucial factor in treating schizophrenia. Treatment results are much more dependent upon whether and how a patient takes medication than its efficacy. Lack of cooperation in treatment is the greatest barrier to benefit from therapy. Reasons for the lack of cooperation:

- lack of understanding and acceptance of disease by patients and their caregivers
- disease result - patients with cognitive disorders, attention and memory deficit have problems in understanding what is expected from them, how to take medication
- non-acceptance of diagnosis - patients do not see the need to take drugs
- problems in cooperation between patients and doctors in schizophrenia treatment usually occurs when oral antipsychotic drugs are used

Lack of cooperation in treatment is the greatest barrier to benefit from therapy.

BURDEN ON CAREGIVERS

- most patients fail to complete higher education due to early symptoms.
- by 10-20 years on average

SCHIZOPHRENIA SHORTENS LIFE

- by 10-20 years on average

COSTS OF SCHIZOPHRENIA IN POLAND IN 2013

- 187,000 schizophrenic patients treated in Poland
- 27mn over the years 2010-2014
- 1.1-3.1 bn total sum of direct and indirect costs related to schizophrenia treatment
- 523,877 hospitalization days related to schizophrenia funded by the National Health Fund (i.e. nearly 150 years)
- 34.8 days average length of patient hospitalization
- 12.6 days the increase in hospitalization time between 2010 and 2013
- 827,785,000 PLN work incapacity pensions
- 252,647,000 PLN social pensions
- 85% of caregivers had to change job
- 25% of caregivers had to reduce their working hours by one-third
- 10% per week is spent on care - two-third of another full-time job