

## Abstract

**Background:** Cardiovascular diseases are the leading cause of death in patients with schizophrenia. Metabolic syndrome, which is a significant risk factor for cardiovascular diseases, has increased prevalence in patients with schizophrenia and those on second-generation antipsychotics (SGAs). While the local scene is unknown, overseas studies found suboptimal practice despite published guidelines on monitoring of metabolic parameters.

**Method:** In two psychiatric outpatient clinics in Hong Kong, a two-phase clinical audit was conducted on the monitoring of the metabolic parameters in patients with schizophrenia and related disorders and taking SGAs, against six audit standards on the monitoring of body weight (BW), body mass index (BMI), waist circumference (WC), blood pressure (BP), plasma glucose and lipid. Change interventions, including development of a hospital guideline, were applied to facilitate change in practice.

**Result:** The baseline audit, involving 1400 eligible patients, revealed that a measurement of BW in the previous one year was recorded in 9% of the patients, BMI and waist circumference in nil, BP in 4%, plasma glucose in 30% and plasma lipid in 12%. In the re-audit which included 1783 eligible patients, these figures

increased to 59% in BW, 54% in BMI and WC, 56% in BP, 69% in plasma glucose, and 61% in plasma lipid. Nonetheless, in the re-audit, there was still an absence of measurement in 41% of patients in BW, 46% in BMI, 46% in WC, 44% in BP, 32% in plasma glucose and 39% in plasma lipid. The most important obstacle in implementation of monitoring, as revealed by a questionnaire survey after the re-audit, was insufficient consultation time.

**Conclusion:** This clinical audit has significantly improved the practice of monitoring in a group of psychiatric outpatients susceptible to metabolic syndrome. However, more changes within the service, from logistics to resource input, is required to achieve a higher level of performance.