

## 1. ABSTRACT

**Background:** High-dose antipsychotic prescribing is a common practice worldwide with around 20-25% of inpatients receiving high doses, despite recommendations against its use. In 2006, the Royal College of Psychiatrists issued a Consensus Statement on the Use of High Dose Antipsychotic Medication, with recommendations to enhance patient safety and clinical effectiveness. There was no recent data on the rate and predictors of high-dose antipsychotic prescribing in Hong Kong. Little was known about the level of adherence to the Consensus Statement recommendations and the effect of quality improvement interventions in the local setting.

**Method:** A baseline audit was performed by analysing the antipsychotic prescriptions of a large cross-sectional sample of all psychiatric inpatients and outpatients in the New Territories West Cluster. Case notes of patients on high doses were reviewed and compared to recommendations in the 2006 Consensus Statement on the Use of High Dose Antipsychotic Medication issued by the Royal College of Psychiatrists. These findings and the recommendations of the Consensus Statement were disseminated through a lecture and by individualised patient-specific reminders to doctors. A re-audit was performed one year later to ascertain changes in the rate of high-dose antipsychotic prescriptions and the level of adherence to the recommendations.

## Audit of high-dose antipsychotic prescriptions

**Results:** At baseline, 9.2% of inpatients and 1.8% of outpatients received high doses. Antipsychotic polypharmacy was the strongest predictor of high-dose prescribing, with an odds ratio of 8.88 for inpatients and 10.82 for outpatients. Almost all case notes failed to record the clinical indications for high-dose prescribing or that the patient had been informed. Electrocardiograms were rarely performed. At re-audit, there was a statistically significant decrease in the rate of high-dose prescribing, with 6.5% of inpatients and 1.3% of outpatients receiving high doses. There was also a significant improvement in the adherence to the recommendations in the Consensus Statement, most noticeable in cases identified through individual reminders to case doctors.

**Conclusion:** The local rate of high-dose antipsychotic prescribing was lower than the results of similar international studies, but there was poor adherence to the recommendations in the 2006 Consensus Statement of the Royal College of Psychiatrists. The improvement in both the rate of high-dose prescribing and adherence to the recommendations suggests that the use of lectures and individual reminders may be useful in changing prescribing practices. Re-audits should be performed at regular intervals to monitor change, assess the effectiveness of interventions, and to determine further areas for improvement.

**Key words:** antipsychotic agents; audit; prescribing pattern; quality assurance