

Oral presentation

Choosing among atypical antipsychotics based on clinical data A Mortimer*

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At least six atypical antipsychotics are now available worldwide for the management of schizophrenia, with more in development. Influential guidelines for instance those produced in the UK by the National Institute of Clinical Excellence (NICE) recommend first-line use of atypical drugs in many, perhaps most, clinical situations. Unlike conventional antipsychotics, the atypical drugs manifest consequential differences in mechanism of action and side effect profile, which confront the clinician with a complex treatment choice. Despite these differences and some new problematic side effects such as weight gain and type II diabetes with some options, market share evidence suggests that drug choice is not entirely based on individual clinical factors. Head-to-head comparisons of atypical antipsychotics are few. This presentation will explore the differences between atypical antipsychotic drugs and will cover the existing 'head to head' comparisons, focussing on amisulpride versus olanzapine and amisulpride versus risperidone. Some conclusions will be drawn regarding rational clinical choices and optimal patient management.