Use and Discontinuation Rates of Long-Acting Injectable Antipsychotics between Race/Ethnicity in Older Adults Using Medicaid Claims Data

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Background¹⁻⁵

- Antipsychotics are used to treat schizophrenia
- Patients commonly discontinue oral antipsychotics for many reasons including but not limited to poor medication response, side effects, and stigma
 - Older adults may be at a higher risk for nonadherence
- Long-acting injectable (LAI) antipsychotics may increase adherence
 - However, data are more commonly available in adults < 65 years
- Racial and ethnic differences exist in antipsychotic prescription practices in adult populations
 - Blacks are most often prescribed first generation antipsychotics (FGA) than other populations
- Blacks may be at an increased risk for motor side effects from antipsychotics • In adults 18-64, discontinuation rates of LAI FGA and LAI second generation antipsychotics (SGA) are similar but data in adults >65 years are lacking and need further study

Outcomes

- **Primary:** Analyze the prescribing patterns of LAI antipsychotics in older adults
- **Secondary:** Assess differences in treatment discontinuation rates between different LAI agents and race/ethnicity

References

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- Patel RS, Mansuri Z, Chopra A. Analysis of risk factors and outcomes in psychiatric inpatients with tardive dyskinesia: A nationwide case-control study. Heliyon. 2019;5(5):e01745
- Caballero J, Xu J, Hall DB, Chen X, Young HN. Racial and ethnic differences in patterns of use and discontinuation of long-acting injectable antipsychotics using Medicaid claims data. Ment Health Clin. 2023;13(4):183-189. 5. Pesa J, Liu Z, Fu AZ, Campbell AK, Grucza R. Racial disparities in utilization of first-generation versus second-generation long-acting injectable antipsychotics in Medicaid beneficiaries with schizophrenia. Schizophr Res. 2023;261:170-177.

Methods

- Timeframe: January 1, 2017 December 31, 2021

Results

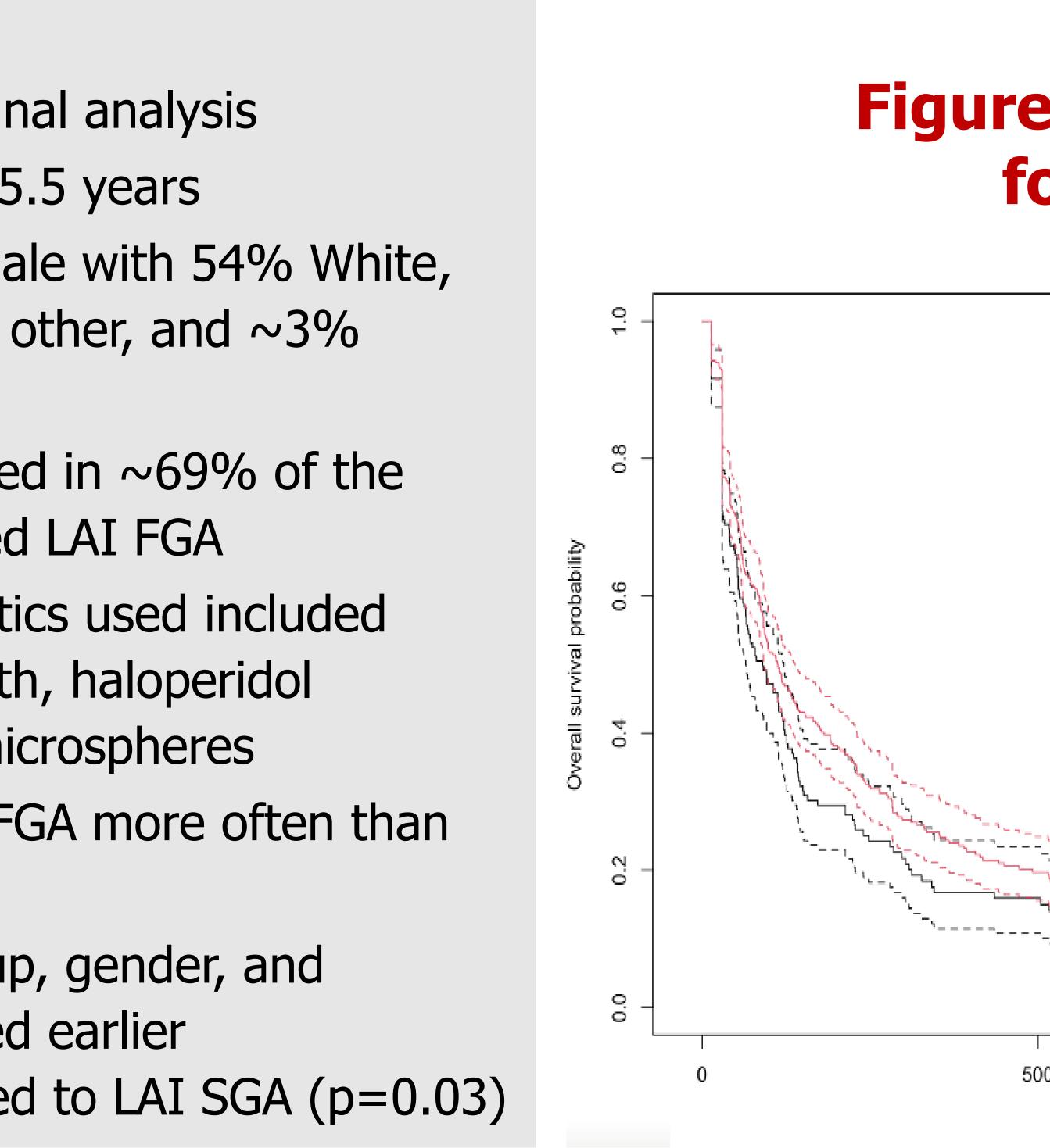
- 528 patients included in the final analysis
- The average age was 70.4 \pm 5.5 years
- Approximately 59% were female with 54% White, 39% Black, 2% Hispanic, 2% other, and ~3% unidentified
- Prescribing of LAI SGA occurred in ~69% of the population and ~31% received LAI FGA
- Most common LAI antipsychotics used included paliperidone palmitate 1-month, haloperidol decanoate, and risperidone microspheres
- Blacks (n=204) received LAI FGA more often than Whites (n=283)
- When controlling for age group, gender, and race/ethnicity, LAI FGA showed earlier discontinuation rates compared to LAI SGA (p=0.03)

Conclusions

- Blacks were prescribed LAI FGA more often than Whites
- for discontinuation between races in older adults

• Patients either had to have ≥ 1 inpatient or ≥ 2 outpatient claims with an International Classification of Diseases, 10th edition (ICD-10) codes for schizophrenia (F20.x), schizotypal (F21) or schizoaffective (F25.x) to be included

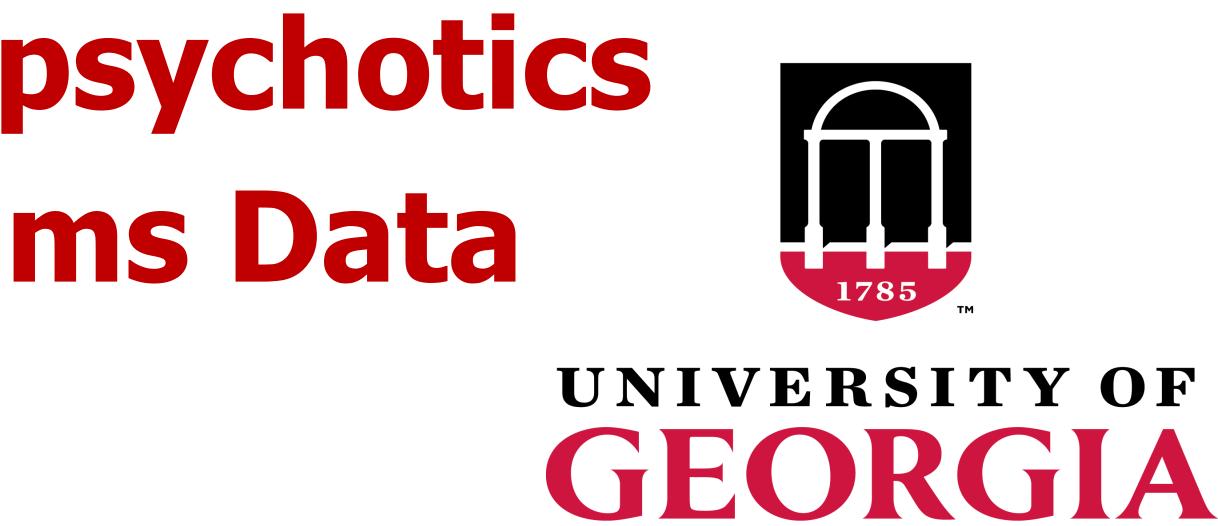
• LAI antipsychotics were identified using National Drug Code numbers for all doses using brand and generic names • Race/ethnicity was classified as Black, Hispanic, White, other, or missing and gender was defined as female or male • Age was separated into three groups: 65-74 years, 75-84 years, and > 84 years • Kaplan-Meier survival curves were utilized, and stratified log-rank tests were used to compare the time until discontinuation distributions across older adults and LAI antipsychotics with significance level set at < 0.05



• Despite the limited sample size, this study explored the prescribing and discontinuation rates between LAI antipsychotics in older adults and differences among race/ethnicity in older adults

• LAI SGA appear to show a more favorable discontinuation rate compared to LAI FGA • Future studies are required to compare individual LAI antipsychotics side effect profiles to determine specific causes

• Future studies are needed to assess the presence of racial disparities and access of LAI SGA for Blacks



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Figure 1. Discontinuation Rates for LAI Antipsychotics

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		LAI SGA
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