

OVERCOMING THE MISCONCEPTIONS & BARRIERS OF LONG-ACTING INJECTABLES (LAIs)



Patients living with schizophrenia or bipolar I disorder may experience obstacles in the treatment journey. One of those obstacles is the set of misconceptions surrounding the use of LAI antipsychotics.¹

MISCONCEPTION

REALITY

“My patient probably doesn’t want an injectable.”

- Many patients, when fully informed about LAIs, may prefer them because LAIs can reduce their daily medication burden^{2,3}
- Conversations about LAIs should focus on the benefits, risks, dosing schedule, and method of administration to provide the patient with a full picture of LAIs
- Patient treatment preferences and needs can evolve. Clinicians can provide ongoing education to patients regarding treatment options to help them make informed decisions⁴

“LAIs are usually reserved for a last-resort treatment option.”

- Newer treatment guidelines from the French Association for Biological Psychiatry and Neuropsychopharmacology and the Canadian Network for Mood and Anxiety Treatments recommend second-generation antipsychotic LAIs as a first-choice option for managing schizophrenia and as a maintenance treatment option for bipolar I disorder⁵
- Additionally, guidelines from the American Psychiatric Association present LAIs as a potential first-line treatment, particularly in patients who might be at risk of nonadherence²

“LAIs don’t seem as safe as oral antipsychotics.”

- Second-generation LAI antipsychotics are water-based formulations that may reduce the occurrence of injection-site-related adverse events¹
- Studies have shown the frequency of adverse events and the rates of discontinuation due to these events are similar for LAIs and oral antipsychotics¹
- Testing patients for tolerability to the LAI before fully transitioning them from oral antipsychotics allows for the detection of potential adverse reactions to the medication⁶

“LAI treatment can be complicated. It’s best to wait until after multiple relapses or recurrences to see whether it should be initiated.”

- Relapses and mood recurrences have significant negative impacts on the patient because each time a person relapses, their brain structure changes and functioning declines^{7,8}
- The National Council Medical Director Institute recommends LAIs for all eligible patients, particularly in the early stages of illness, to prevent negative outcomes^{3,7,8}
- To improve patient treatment access, collaborating with specialty pharmacies that administer injections can help offer regular and reliable treatment

Overcoming barriers and moving forward

Informed, transparent discussions about all available treatment options, including LAIs, can empower your patients with the knowledge to choose treatments that best align with their needs.

1. Kane JM, McEvoy JP, Correll CU, Llorca PM. Controversies surrounding the use of long-acting injectable antipsychotic medications for the treatment of patients with schizophrenia. *CNS Drugs*. 2021;35:1189-1205. 2. The American Psychiatric Association. *Practice Guideline for the Treatment of Patients With Schizophrenia*. 3rd ed. APA; 2021. Accessed June 2024. <https://psychiatryonline.org/doi/pdf/10.1176/appi.books.9780890424841> 3. National Council for Mental Wellbeing. Guide to long-acting medications for clinicians and organizations. December 2021. Accessed June 2024. <https://www.thenationalcouncil.org/resources/guide-to-long-acting-medications/> 4. Weiden PJ, Roma RS, Velligan DI, Alphas L, DiChiara M, Davidson B. The challenges of offering long-acting antipsychotic therapies: a preliminary discourse analysis of psychiatrist recommendations for injectable therapy to patients with schizophrenia. *J Clin Psychiatry*. 2015;76:684-690. 5. Sajatovic M, Ross R, Legacy SN, Correll CU, Kane JM, DiBiasi F, et al. Identifying patients and clinical scenarios for use of long-acting injectable antipsychotics—expert consensus survey part 1. *Neuropsychiatr Dis Treat*. 2018;14:1463-1474. 6. SMI Adviser. How can I manage extrapyramidal side effects from long-acting injectable antipsychotics (LAIs)? May 28, 2020. Accessed June 2024. https://smiadviser.org/knowledge_post/how-can-i-manage-extrapyramidal-side-effects-from-long-acting-injectable-antipsychotics-lais/ 7. Kapczinski NS, Mwangi B, Cassidy RM, et al. Neuroprogression and illness trajectories in bipolar disorder. *Expert Rev Neurother*. 2017;17(3):277-285. 8. Emsley R, Chilliza B, Asmal L. The evidence for illness progression after relapse in schizophrenia. *Schizophr Res*. 2013;148(1-3):117-121.