

MEETING ABSTRACT

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Effect of the Greek Solutions for Wellness weight management program on quality of life and associated factors in patients with a psychiatric disorder receiving psychotropic medication

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Background

Weight gain is a major side effect of treatment with psychotropic agents [1]. Besides its adverse metabolic effects, weight gain may also impair physical functioning and quality of life (QoL) [2]. Clinical weight management programs are reported to improve quality of life in obese individuals not receiving psychotropic therapy [3], but this has not been sufficiently investigated in patients with psychiatric disorders.

The primary objective of this study is to assess the impact of the Greek Solutions for Wellness (SfW) 3-month program, which focuses on nutrition and physical exercise, on QoL in patients with a psychiatric disorder who are taking psychotropic medication and have a weight problem. Secondly it aims to investigate the impact of baseline patient variables (e.g. age, sex, diagnosis) on QoL at month 3.

Materials and methods

This 26-week prospective observational study enrolled 359 patients from outpatient settings routinely carrying out the Greek SfW, from 23/JAN/2007 to 27/FEB/2008. 297 of them entered the program while 62 others who declined, were used as a control group. The QoL instrument Subjective Well-Being under Neuroleptics (SWN), the Clinical Global Impression (CGI) scale, weight (kg), body mass index (BMI, kg/m²) and waist circumference (WC) (cm) were collected at baseline, months 3 (program completion) and 6 (follow

up visit). In addition, diagnosis, disorder duration, treatment regimen and demographic characteristics (age, sex) were recorded. The proportion of patients with a QoL improvement (any SWN increase) was estimated together with their 95% CI in both groups at month 3. Further, stepwise logistic regression models were fitted to adjust the SfW effect on QoL at month 3, controlling for baseline potential confounders and first-degree interactions. A sensitivity analysis was conducted after implausible WC values were found in the database.

Results

Patient characteristics were similar across both groups: Out of 359 patients, a total of 198 (55.2%) were female, the mean age (SD) was 40.6 years (10.9), mean weight (SD) 92.9 kg (17.9), mean BMI (SD) 32.2 kg/m² (5.6). 52.4% of the patients presented with schizophrenia, 30.9% with bipolar disorder and 16.7% other. The mean illness duration was 10.6 years (SD = 8.7). Out of 353 patients still in the study at month 3, 352 were assessable in terms of SWN increase: 206 patients out of 295 in the SfW group (69.8%) (95%CI = [64.2, 75.0]) showed QoL improvement and 33 out of 57 (57.9%) (95%CI = [44.1, 70.9]) in the control group. After controlling for baseline potential confounders the difference between the two groups was OR_{initial} = 1.43 [0.76; 2.67]; OR_{sensitivity} = 1.44 [0.77; 2.71]. Covariates significantly associated with an improved QoL at month 3 included a low SWN score (OR_{initial} = OR_{sensitivity} = 0.94 [0.92; 0.96] and a low CGI-S level (OR_{initial} = OR_{sensitivity} = 0.62 [0.49; 0.79]).

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Conclusions

QoL improvement at 3 months in patients with mental illness as well as weight problems and on psychotropics was associated with low baseline SWN and CGI-S scores, while the big majority of the patients following the Greek SfW program reported an improved QoL.

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