

PHarmacotherapy Monitoring and Outcome Survey

Jaarlijkse evaluatie van de mentale en
lichamelijke gezondheid van antipsychotica gebruikers

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Geen (potentiële) belangenverstrengeling

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umcg



PHAMOUS-onderzoekers



umcg

Wim Veling

Sander de Vos



GGZ Friesland

Edith Liemburg



ggz Drenthe
geestelijke gezondheidszorg

Marieke Pijnenborg



Johan Arends



Lisette van der Meer



Stynke Castelein



Lokale PHAMOUS-coördinatoren

UCP:

Marjolein Haak
Marrit Rozestraten



Lentis:

Bart Hokke
Margreet Mulder, Lianne Sanders



GGZ Drenthe:

Assen: Yolanda Zantige
Emmen: Jeanette Smit
Hoogeveen: Piet Groenia, Bea Wolbink
Meppel: Theo de Jonge, Jeltje Lunenburg



GGZ Friesland:

Magda Hendriks

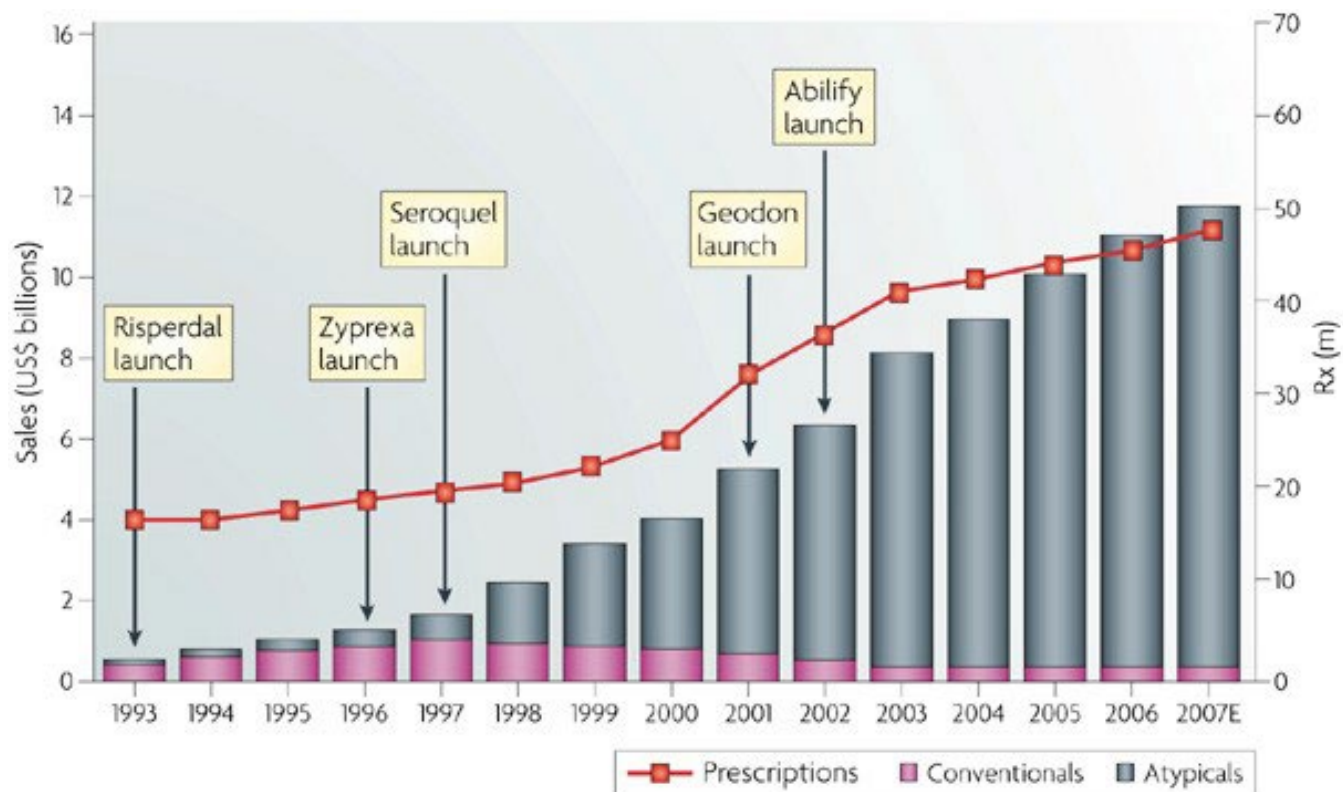


GGNet:

Wanda Pol



Aanleiding PHAMOUS



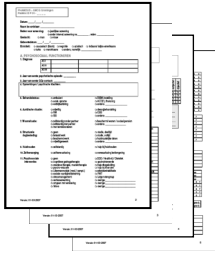
Nature Reviews | Drug Discovery

Metingen

<u>Domein</u>	<u>Naam</u>	<u>MOPHAR</u>	<u>PHAMOUS</u>
Lichamelijke gezondheid	<i>Lichamelijk onderzoek</i>	✓	✓
	<i>Somatische anamnese</i>	✓	✓
	<i>Lab-bepalingen</i>	✓	✓
Medicatie	<i>Medicatiegebruik</i>	✓	✓
	<i>Bijwerkingen (SMS)</i>	✓	✓
	<i>Medicatierouw (MARS-6)</i>	✓	✓
Leefstijl	<i>Leefstijlvragenlijst</i>	✓	✓
	<i>Middelengebruik</i>	✓	✓
Herstel	<i>I-ROC</i>	✓	✓
Symptomen	<i>OQ-45</i>	✓	✗
	<i>PANSS</i>	✗	✓
Functioneren	<i>WHODAS 2.0</i>	✓	✓
	<i>Happiness Index</i>	✓	✓
Bewegingsstoornissen	<i>St. Hans Rating Scale</i>	✗	✓
Aanvullende screening	<i>ISI</i>	✓	✗
	<i>PCL-5, JTV (intake)</i>	✓	✗
Overig	<i>Zorggebruik</i>	✗	✓
	<i>Tevredenheid zorg</i>	✗	✓

Rapportage

Metingen



A screenshot of a medical measurement form, likely for a patient's vital signs and symptoms. It includes fields for patient information, measurement dates, and a table for recording data over time.



Rapport



A screenshot of a medical report, showing a detailed summary of a patient's condition, including a history of present illness, physical examination findings, and a discussion of the case.



Behandelaar



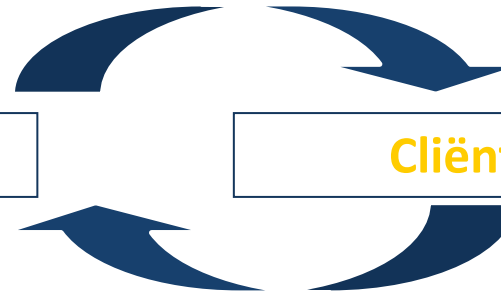
Rapport huisarts



A screenshot of a medical report, similar to the one above, showing a detailed summary of a patient's condition and treatment plan.

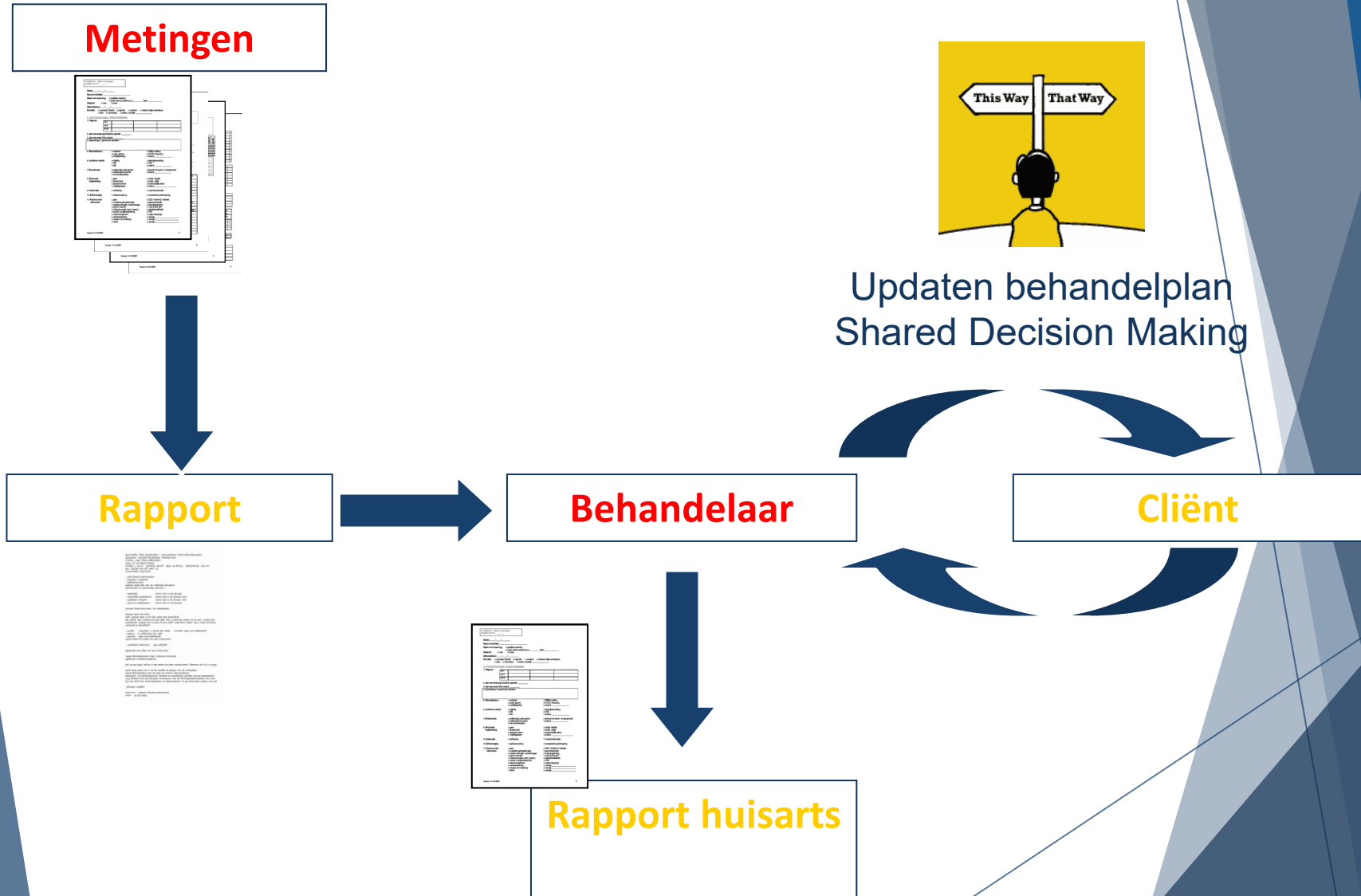


Updaten behandelplan
Shared Decision Making



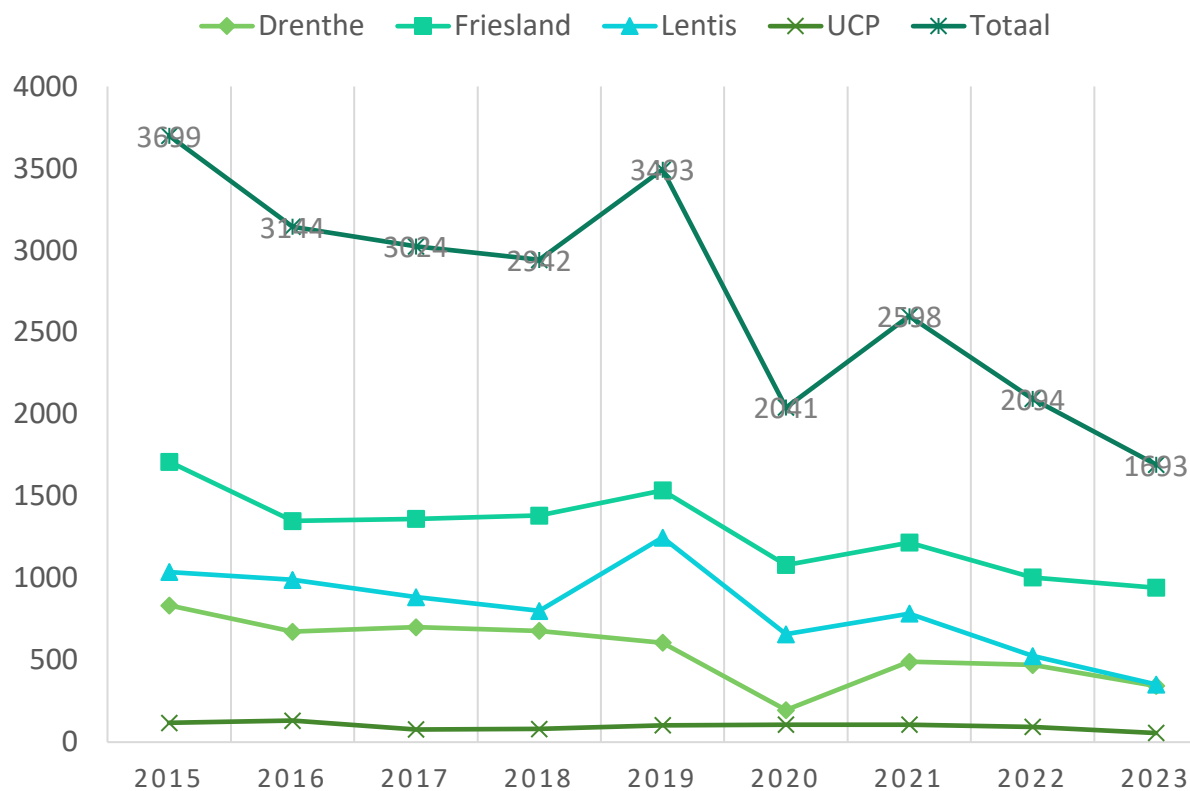
Cliënt

Knelpunten



Aantal metingen

LICHAMELIJK ONDERZOEK



→ Dus: “Geen zorgafstemmingsgesprek zonder PHAMOUS”

Terugkoppeling/implementatie

Table 3. Prevalence of Treatment Recommendation and Treatment Prescriptions^a

Disposition of Treatment	Assessment 1	Assessment 2	Assessment 3	Wald χ^2	P
Treatment was recommended					
Overall	51.9 (654)	55.8 (703)	59.3 (746)	25.15	<.001**
Antihypertensive drugs	42.0 (529)	43.9 (553)	45.8 (576)	6.29	.043*
Lipid-lowering drugs	21.0 (264)	27.6 (347)	31.5 (397)	72.3	<.001**
Antihyperglycemic drugs (fasting glucose)	8.0 (70)	8.7 (87)	10.2 (102)	1.53	.464
Antihyperglycemic drugs (total glucose)	7.1 (90)	8.3 (104)	9.2 (116)	10.67	.005**
Patients receiving the recommended treatment					
Overall	43.0 (281)	48.2 (339)	50.4 (376)	41.74	<.001**
Antihypertensive drugs	31.0 (164)	35.3 (195)	37.8 (218)	18.83	<.001**
Lipid-lowering drugs	56.1 (148)	55.0 (191)	55.7 (221)	11.99	.002**
Antihyperglycemic drugs (fasting glucose)	74.3 (52)	77.0 (67)	72.5 (74)	0.49	.784
Antihyperglycemic drugs (total glucose)	76.7 (69)	77.9 (81)	74.1 (86)	0.83	.661
Patients not receiving the recommended treatment					
SBP ≥ 155 mm Hg	14.8 (54)	16.5 (59)	18.7 (67)	...	...
Serum LDL cholesterol level ≥ 4.0 mmol/L	35.3 (41)	32.7 (51)	25.6 (45)	...	...
Fasting serum glucose level ≥ 8.5 mmol/L	16.7 (3)	15.0 (3)	25.0 (7)	...	...
Total serum glucose level ≥ 8.5 mmol/L	23.8 (5)	17.4 (4)	23.3 (7)	...	...

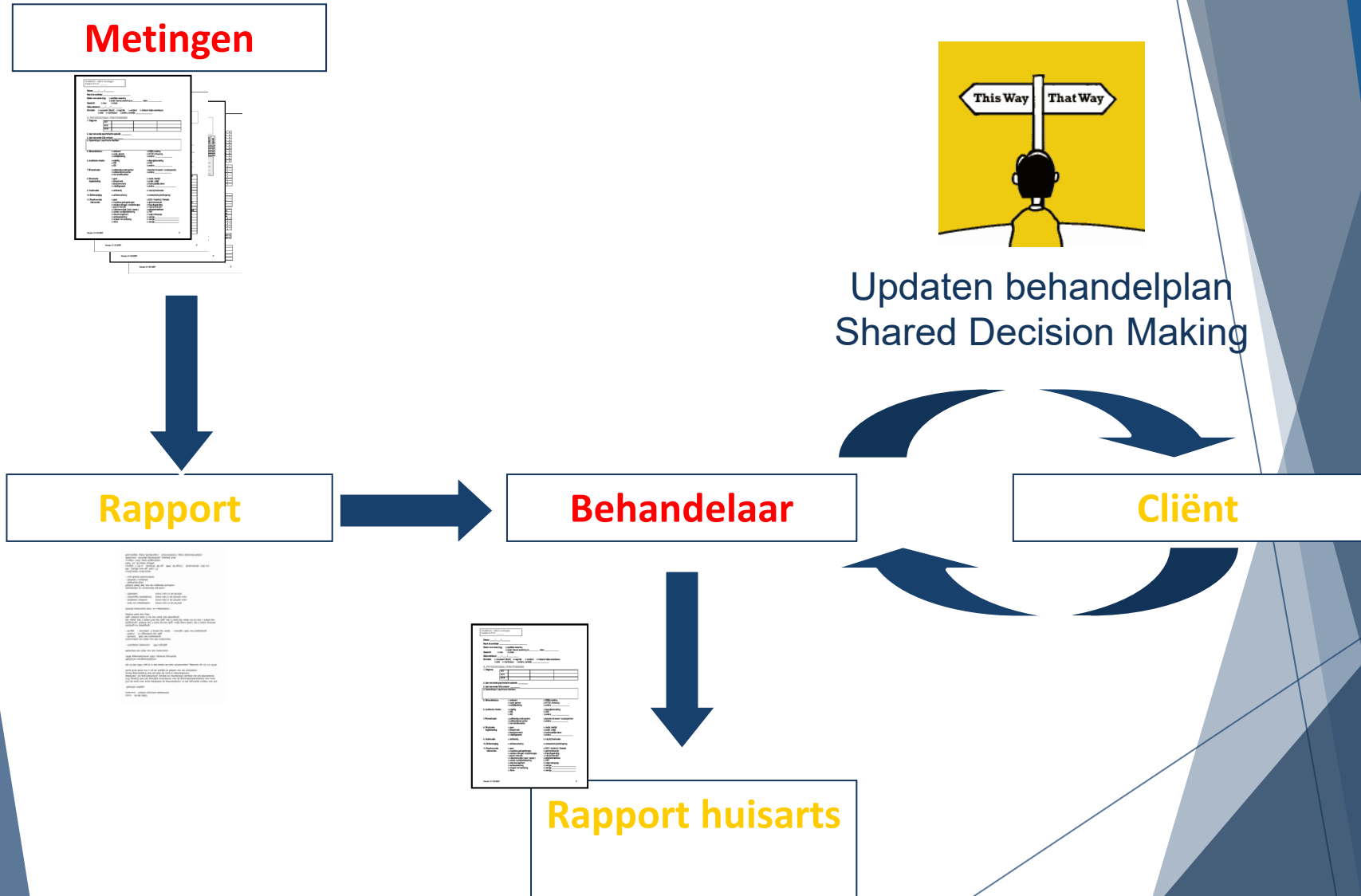
^aValues at each assessment shown as % (n). N = 1,259 at all 3 assessments.

*Significant at $\alpha < .05$. **Significant at $\alpha < .01$.

Abbreviations: LDL = low-density lipoprotein, SBP = systolic blood pressure.

Symbol: ... = not applicable.

Knelpunten



Meten is weten(schap)!

Totaal 30 wetenschappelijke publicaties sinds 2008



Contents lists available at [ScienceDirect](#)

Journal of Psychiatric Research

journal homepage: www.elsevier.com/locate/jpsychires



Financial dissatisfaction in people with psychotic disorders - A short report on its prevalence and correlates in a large naturalistic psychosis cohort

J.L. Jansen^{a,*}, R. Bruggeman^{a,b}, H.A.L. Kiers^c, PHAMOUS-investigators, G.H.M. Pijnenborg^{a,d}, S. Castelein^{a,b,e}, W. Veling^f, E. Visser^b, L. Krabbendam^g, J. Koerts^a

phamous³

pharmacotherapy monitoring and outcome survey

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Extra slides

Doeleinden ROM-PHAMOUS

- **Clïënt:**
 - Sinds 2006 jaarlijkse screening om effecten langdurig antipsychotica-gebruik te monitoren
 - In kaart brengen van mentale, fysieke en sociale gesteldheid
 - Clïënttevredenheid en herstel
- **Behandelaar:**
 - Update voor behandelplan
- **Optimaliseren zorgverlening**
 - verplichting t.o.v. zorgverzekeraar
- **Wetenschappelijk onderzoek**

Metabool risico antipsychotica

Table 1. Relative Effect of SGAs on Metabolic Disturbances

Generic (Trade Name)	Weight Gain	Dyslipidemia	T2DM
Olanzapine (Zyprexa)	High	High	High
Clozapine (Clozaril)	High	High	High
Risperidone (Risperdal)	Moderate	Low to moderate	Low
Ziprasidone (Geodon)	Low	Low	Low
Quetiapine (Seroquel)	Moderate	Moderate	Low to moderate
Aripiprazole (Abilify)	Low	Low	Low
Paliperidone (Invega) ^a	Low	Low	Low
Asenapine (Saphris) ^a	Low to moderate	Low	Unknown
Iloperidone (Fanapt) ^a	Low to moderate	Low	Unknown

^a Due to the limited trial data for these agents, their metabolic-effect profiles are based on the package insert.
SGA: second-generation antipsychotic; T2DM: type 2 diabetes mellitus.
Source: References 1, 6.

Training en Bijscholing

- PHAMOUS basistraining
- PANSS training
- St Hans Rating Scale (SHRS) / EPS training

Zie: <https://www.rgoc.nl/trainingen/>