

ARE PSYCHOTIC CANNABINOID USERS HARDER TO TREAT? A PROSPECTIVE STUDY

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1. Objective

To assess whether cannabinoid users hospitalized for psychosis respond differently to antipsychotic treatment than those with psychosis without concomitant cannabinoid use (CU).

2. Background

The current statistic reports show astounding rates of cannabinoid use, fact which is widely verified among patients in psychiatric wards, especially those admitted for psychosis. Bearing in mind the extensively discussed link between cannabis and psychosis, it seems relevant to examine how well users respond to antipsychotic treatment, with possible management and prognostic implications.

3. Materials and Methods

An observational prospective study was conducted by measuring the response to treatment through the number of hospitalization days and by the clinical improvement displayed on the Clinical Global Impression (CGI) scale and the Brief Psychiatric Rating Scale (BPRS). Patients included are the ones admitted in a Psychiatric ward from January 1st to June 30th 2019 with a psychosis diagnosis. We accounted for cannabinoid use within one month prior to admission. Statistics were performed with SPSS version 23.

4. Results

28 patients were admitted during this 6-month period with a diagnosis of psychosis.

7 of those (25%) had CU within one month prior to admission.

The mean BPRS score at admission (BPRSt-A) was higher on the CU group without statistical significance ($p=0,540$).

The mean BPRS score on discharge (BPRSt-D) was higher on the CU group with statistical significance ($p=0,036$).

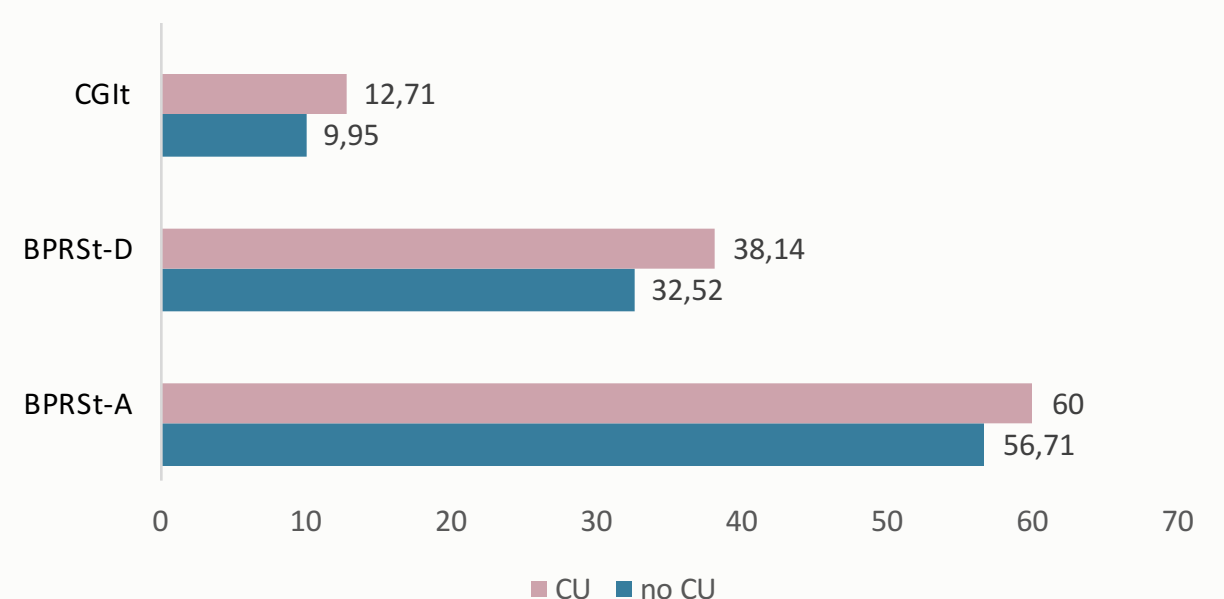
The mean total CGI score (CGIt) was higher on the CU group with statistical significance ($p=0,008$).

The number of hospitalization days did not differ between the two groups with statistical significance ($p=0,296$).

There was no correlation between improvement on the BPRS scale and the number of hospitalization days ($p=0,177$).

	N	Minimum	Maximum	Mean	Standard deviation
Hospitalization days	28	8	56	21,50	9,894
CGIt	28	7	17	10,64	2,468
BPRSt-A	28	33	81	57,54	11,983
BPRSt-D	28	24	63	33,93	8,696
BPRS variation	28	0	45	23,61	10,397

Table 1. Descriptive Statistics



Graphic 1. Comparative Statistics

5. Discussion/Conclusion

These results indicate that psychotic patients with cannabinoid use tend to present with more severe symptoms. Although this difference was not statistically relevant, the gap between the two groups on the BPRS score increased on discharge, becoming statistically significant. Furthermore, the mean total CGI score being higher on the CU group corroborates these findings, showing a lower improvement rate.

Therefore, this suggests that patients presenting with psychotic symptoms and cannabinoid use display not only more severe clinical pictures, but also a less satisfactory response to treatment.

Despite being a broadly discussed subject, there are still very few studies that aim to differentiate the response to antipsychotic treatment between cannabinoid users and non-users. Hence this study highlights the need for further research, with obvious prognostic implications.