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APA Says CATIE Schizophrenia Study Argues for Full Range of Treatment Options

Arlington, Va. – Today the American Psychiatric Association (APA) commented on the groundbreaking research on schizophrenia that will be published in the September 22, 2005, edition of the *New England Journal of Medicine (NEJM)*. The study, known as “Clinical Antipsychotic Trials of Intervention Effectiveness” (CATIE), was sponsored by the National Institute of Mental Health (NIMH) and involved more than 1,400 patients with schizophrenia. It is the first head-to-head comparison of different antipsychotic medications and their effectiveness and safety.

“The American Psychiatric Association was an early supporter of CATIE and we continue to advocate for head-to-head comparisons of medications,” said Darrel A. Regier, M.D., M.P.H., director of the APA’s Division of Research. “CATIE shows that there’s no one-size-fits-all treatment. None of these medications is without side effects and none is without substantial benefit. It is vital that we preserve access to a full range of medications and respect physicians’ clinical judgments about which medication to use and when to change.”

CATIE found that only 18 to 26 percent of patients remained on the initial medication for 18 months in all treatment groups except olanzapine (36 percent), validating clinicians’ belief that, in order to offer the greatest benefit and the least adverse side effects for the individual patient, it is often necessary to try two or more medications.

In February 2004 the APA published the second edition of its guideline for treating patients with schizophrenia.

“This study contributes to our body of knowledge,” said Anthony F. Lehman, M.D., M.S.P.H., who chaired the APA’s work group on schizophrenia treatments and who is professor and chair of the Department of Psychiatry at the University of Maryland School of Medicine. “From a public policy perspective, it would be a mistake to conclude that restricting access to any of the currently available antipsychotic medications is in the interest of patient care. Since all medications have potentially serious side effects, individual patient risk factors need to be considered in choosing a medication. The more choices, the better. This is consistent with the APA’s Guideline on Treatment of Schizophrenia.”

In his *NEJM* editorial accompanying the study, Robert Freedman, M.D., observed that the introduction of antipsychotic medications has had a profound social impact: today the vast majority of patients with schizophrenia are able to live in their communities as opposed to institutional settings. Treatment of schizophrenia has come a long way, but schizophrenia remains a mental illness that often requires long-term management.

“We commend NIMH for undertaking this large-scale clinical trial and we await more information from future reports from CATIE,” said Dr. Regier, noting that the Thursday edition of the *NEJM* carries only the first round of findings from CATIE. “Schizophrenia is a severe medical condition that requires medical training and the patient’s involvement to consider the metabolic and neurological side effects as well as the substantial benefits these medications can bring.”

About the American Psychiatric Association:

The American Psychiatric Association is a national medical specialty society whose more than 37,000 physician members specialize in the diagnosis, treatment and prevention of mental illnesses including substance use disorders. Healthy Minds. Healthy Lives. Care that works to get your mind healthy again so you can lead a healthy life. Visit APA at www.psych.org and www.healthyminds.org.