#### WELCOME



## **Clozapine & LAI Virtual Forum**

April 5, 2023 | 4:00 - 4:45 pm ET

The Clozapine & LAI Virtual Forum is an all-new, peer-to-peer, interactive dialogue between psychiatrists, nurse practitioners, and other prescribing clinicians.

It is informal, no registration required — just join our Zoom call and share your challenges and questions on the month's trending topic around either clozapine or LAIs.

#### **TODAY'S TOPIC:**

Physical Health / Cardiometabolic Monitoring for Patients on Long-Acting Injectable (LAI) Antipsychotic Medications





#### **MODERATORS**

#### Donna Rolin, PhD, APRN

Dr. Donna Rolin is Clinical Associate Professor and the Psychiatric Mental Health Nurse Practitioner (PMHNP) Program Director at the University of Texas. She serves as SMI Adviser Nursing Expert.

#### Megan Ehret, PharmD, MS, BCPP

Dr. Megan Ehret is a Professor at University of Maryland School of Pharmacy in the Department of Pharmacy Practice and Science. She is a Past-President of the College of Psychiatric and Neurologic Pharmacists. She serves as SMI Adviser Pharmacy Consultant.

#### Leon Ravin, MD, FACLP

Dr. Leon Ravin is a Clinical Professor at the University of Nevada Las Vegas School of Medicine and the Statewide Psychiatric Medical Director for the Division of Public and Behavioral Health, State of Nevada. Dr. Ravin serves on the Executive Committee of the Medical Directors Council of the National Association of State Mental Health Program Directors, on the Conference Committee for the National Psychopharmacology Update, and on the SMI Adviser LAI Workgroup.



# Discussion Questions for Virtual Forum: Physical Health / Cardiometabolic Monitoring for Patients on LongActing Injectable (LAI) Antipsychotic Medications

- As a psychiatric prescribing clinician, are you responsible to monitor your patients' (who are prescribed LAI antipsychotics) physical health?
  - What labs are you routinely monitoring?
  - What other assessments or tests are you monitoring?
- Are you able to collaborate with your patients' PCP or other clinicians?
  - Do you conduct monitoring on your own (not collaboratively)?
- What are some of the common challenges?



# Antipsychotic Monitoring Guidelines (APA, 2020)

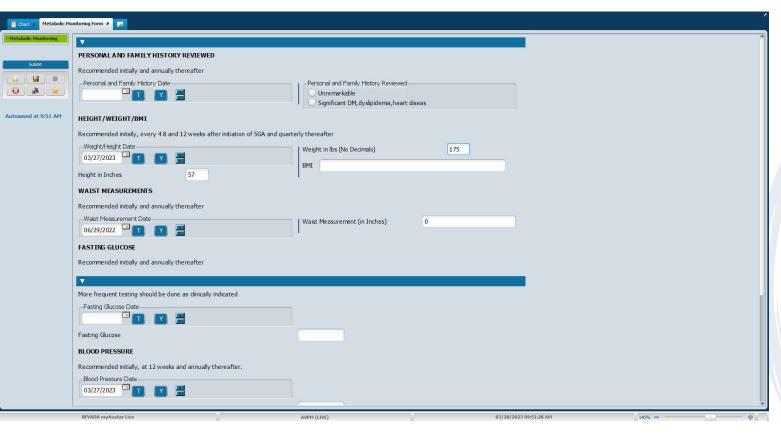
Assessment	<u>Initial or Baseline</u>	<u>Follow-up</u>
Vital signs	Pulse, blood pressure	Pulse; Blood pressure; temperature as clinically indicated
Body Weight and height	BMI (body weight and height)	BMI every visit for 6 months and at least quarterly thereafter
Diabetes	Screening for diabetes risk factors, fasting blood glucose Pre-diabetes: HgB A1C 5.7-6.4 FPG 100-125 2h OGTT 140-199	Fasting blood glucose or hemoglobin A1c at 4 months after initiating a new treatment and at least annually thereafter
Hyperlipidemia	Lipid panel	Lipid panel at 4 months after initiating a new Antipsychotic medication and at least annually thereafter
Metabolic syndrome [These measures are likely captured in previously listed monitoring categories (above) BMI, lipid panel (hyperlipidemia screening), VS, FPG (diabetes screening)]	Determine if metabolic syndrome criteria are met  Central obesity (+2 other factors):  Waist circumference with ethnicity specific values (or BMI>30 assumed)  Triglycerides => 150 (or Rx for hypertriglyceridemia)  HDL <40 males / <50 females (or Rx for decreased HDL)  BP systolic BP => 130 or diastolic BP => 85 (or Rx for hypertension)  FPG => 100 (if >100, OGTT recommended) (or previously Dx T2 Diabetes)	Determine if metabolic syndrome criteria are met at 4 months after initiating a new antipsychotic medication and at least annually thereafter

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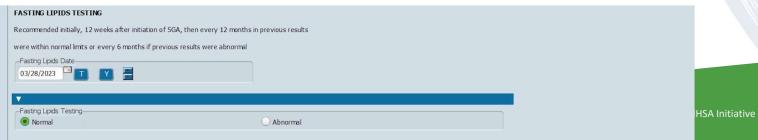
# Antipsychotic Monitoring Guidelines (APA, 2020)

Assessment	Initial or Baseline	Follow-up
QTc prolongation	ECG before treatment with chlorpromazine, droperidol, iloperidone, pimozide, thioridazine, or ziprasidone or in the presence of cardiac risk factors	ECG with significant change in dose of chlorpromazine, droperidol, iloperidone, pimozide, thioridazine, or ziprasidone or with the addition of other medications that can affect QTc interval in patients with cardiac risk factors or elevated baseline QTc intervals
Hyperprolactinemia	Screening for symptoms of hyperprolactinemia.  Prolactin level, if indicated on the basis of clinical history	Screening for symptoms of hyperprolactinemia at each visit until stable, then yearly if treated with an antipsychotic known to increase prolactin.  Prolactin level, if indicated on the basis of clinical history
Antipsychotic- induced movement disorders	Clinical assessment of akathisia, dystonia, parkinsonism, and other abnormal involuntary movements, including tardive dyskinesia.  Assessment with a structured instrument (e.g., AIMS, DISCUS) if such movements are present	Clinical assessment of akathisia, dystonia, parkinsonism, and other abnormal involuntary movements, including tardive dyskinesia, at each visit.  Assessment with a structured instruments (e.g. AIMS, DISCUS) at a minimum of every 6 months in patients at high risk of tardive dyskinesia and at least every 12 months in other patients as well as in new onset or exacerbation of pre-existing movements is detected at any visit

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Tracking and Documentation of Monitoring in EHR

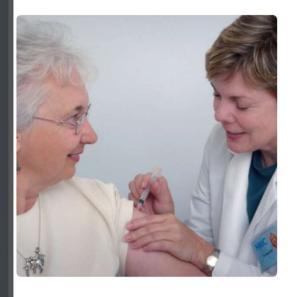




# SMI Adviser LAI Center of Excellence

Clinical Tips
Educational Webinars
VF Recordings
\*NEW\*LAI Injection Videos

https://smiadviser.org/about/la



# Welcome to the Long-Acting Injectable (LAI) Center of Excellence (COE)

SMI Adviser created the LAI COE to promote the safe and effective use of LAIs. The ultimate goal of this effort is to improve the lives of individuals who have schizophrenia, schizoaffective, and bipolar disorders. The LAI COE provides clinicians with training opportunities, technical assistance, and vetted resources. These include:

- · Live and on-demand webinars
- Virtual Learning Collaboratives
- · Virtual Forums
- · Email listserv
- · On-demand consultations
- · Intensive consultation to sites or communities
- · Clinical tips and resources

The LAI COE is led by SMI Nursing Expert, Donna Rolin, PhD, APRN, SMI Adviser Physician Expert, Robert Cotes, MD, and SMI Adviser content partner, National Association of State Mental Health Program Directors (NASMHPD), and supported by members of the LAI Workgroup.

For individual and family resources on using long-acting injectables, visit the individual and family Knowledge Base.

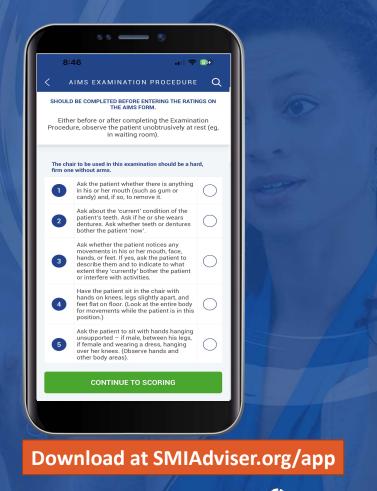




SMI ADVISER MOBILE APP: Rating Scales, including AIMS







**PSYCHIATRIC** 

An APA and SAMHSA Initiative

## **FEEDBACK**

Please help us improve the Clozapine & LAI Virtual Forum by completing this survey: <a href="http://smiadviser.org/forumfeedback">http://smiadviser.org/forumfeedback</a>



### Pre-submit Cases/Related Questions

www.smiadviser.org/vfcases

# UPCOMING VIRTUAL FORUM Clozapine-induced Sialorrhea and Botulinum Toxins 5/3/23 @4 – 4:45 PM ET

For additional questions and resources – join the Clozapine and LAI Centers of Excellence Exchange Community

www.smiadviser.org/cloz lai signup

