

	Hospital one (n=58)	Hospital two (n=61)	Hospital three (n=59)	Hospital four (n=60)	Significance p=
Age in years (SD)	43 (11.9)	41 (13.5)	41 (14.1)	44 (12.2)	NS
Comorbid physical illness	27%	26%	17%	40%	0.049
Patients detained	36%	36%	31%	33%	NS
Patients with psychotic diagnosis	67%	60%	61%	62%	NS
Regular prescriptions, mean (SD)	2.44 (1.00)	1.73 (0.82)	2.45 (1.42)	2.33 (1.46)	0.04
As-required prescriptions, mean (SD)	1.67 (0.72)	1.38 (0.50)	1.78 (1.26)	1.33 (1.00)	0.02
Off-label prescribing	60%	33%	51%	33%	0.05
High-dose antipsychotic	10%	0%	6%	13%	0.025
More than one antipsychotic	28%	3%	12%	14%	0.025
Deviation from BNF or polypharmacy documented	5%	9%	7%	5%	NS
Patients with psychosis on atypical antipsychotic	69%	95%	58%	83%	0.001

Table 1. Patient demographics and prescribing practice at the four hospitals audited

scribed varied between 15 at hospital two, 19 at hospital one, 20 at hospital four, and hospital three showing the greatest prescribing range with 30. These figures would be higher if we had distinguished between different preparations.

Off-label prescribing was relatively high in all hospitals. These figures would have been lower but at the time of our audit, only one atypical had a licence for mania. If a drug was prescribed off-label at a high dose or for an unlicensed indication then this was poorly recorded in the notes.

Table 2 shows the proportion of patients taking regular antipsychotic medication who are monitored. Uptake was poor, especially at hospital two. Not all drugs are associated with raising prolactin levels but we still used being on any antipsychotic as a denominator. We did not record full blood counts as this is mandatory for clozapine and may have potentially skewed the result.

At the time of our audit there had been a change in the SmPC for venlafaxine requiring ECG monitoring, which has recently

been reversed. Only two (7 per cent) patients had an ECG and both were inpatients at hospital four. The SmPC for mirtazapine requires that patients are advised to report 'any fever, sore throat...'. This was only documented once in the 11 patients taking mirtazapine, again at hospital four.

Discussion

Our results show some improvement in prescribing practice since the Royal College of Psychiatrists' survey^{4,5} but it should be acknowl-

	Hospital one (n=58)	Hospital two (n=61)	Hospital three (n=59)	Hospital four (n=60)	Significance p=
Blood glucose	47%	5%	66%	56%	0.001
ECG	14%	0%	28%	22%	0.049
Lipids	20%	5%	7%	5%	NS
Prolactin	3%	0%	17%	5%	*
Liver function tests	62%	33%	69%	85%	0.001

* Insufficient numbers for reliable analysis

Table 2. Monitoring of patients taking antipsychotics at the four hospitals audited (percentage of patients having test)