The relation between second-generation antipsychotics and laxative use in elderly patients with Schizophrenia

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Background
Laxatives are the mainstay of constipation management and are commonly used among elderly persons for both treatment and prevention of constipation.

Aims & Objectives
We aimed to investigate factors associated with concomitant laxative use among elderly patients with schizophrenia, discharged on second-generation antipsychotics (SGAs), from two large public psychiatric hospitals in Taiwan.

Methods
Elderly patients with schizophrenia who were discharged between 2006 and 2019 and received SGA monotherapy at discharge were included in the analysis. Multivariate logistic regression was used to identify factors associated with regular laxative use at discharge. The Cochran-Armitage trend test was used to evaluate whether significant time trends existed for rates of laxative use at discharge.

Results
A total of 2,591 elderly patients with schizophrenia were discharged during the study period, and 1, 727 of 2,591 patients who met the inclusion criteria were included for analysis. Of these 1,727 patients, 732 (42.4%) also received concomitant laxatives. Female gender, mood stabilizer use and concomitant diabetes mellitus were found to be associated with increased laxative use. Among SGAs, clozapine was associated with the highest rate of laxative use, followed by zotepine, quetiapine, olanzapine and risperidone. Additionally, risperidone, amisulpride, aripiprazole, paliperidone and sulpiride were associated with comparable rates of laxative use. Laxative use rates grew over time from 30.8% in 2006 to 46.6% in 2019 ($z = 4.83$, $p<0.001$).

Discussion & Conclusion
Laxative use is common in elderly schizophrenia patients treated with SGAs. In cases of clinically significant constipation, switching to an SGA with a lower risk for constipation, or discontinuation the use of mood stabilizers should be considered, if clinically feasible.