In Summary: Evidence on Combining Medications With Antipsychotics in Schizophrenia

| with Antipsychotics in Schizophrenia | | |
|--|---|---|
| Adjunctive Medication | Risk/Benefit | Notes |
| Antidepressants | Lower rates of psychiatric hospitalizations and ED visits Improvement in negative symptoms | Little research on the comparative efficacy of different adjunctive antidepressants |
| Antipsychotics | Benefit appears limited primarily to combinations where one of the antipsychotics is either clozapine or a long-acting injectable Clozapine + aripiprazole has the lowest rate of psychiatric rehospitalizations compared to other agents either alone or in combination | Combinations of other antipsychotics are of questionable benefit |
| Benzodiazepines | Poorer outcomes, including more psychiatric admissions and ED visits | Best to minimize |
| Mood stabilizers | Lithium: total symptom reduction¹ Lamotrigine: total symptom reduction, positive & negative symptoms Valproate: RCTs show no evidence of benefit | |
| Other agents (minocycline, NSAIDs, topiramate) | Total symptom reduction, positive & negative symptoms | Not enough evidence yet to recommend as adjunctive treatments |

¹ Based on the Positive and Negative Syndrome Scale (PANSS) and Brief Psychiatric Rating Scale (BPRS)

From the Expert Q&A:

"Combination Treatment for Schizophrenia" with T. Scott Stroup, MD, MPH

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