

BREAST CANCER TREATMENT OUTCOMES IN SCHIZOPHRENIC PATIENTS.

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Introduction: Schizophrenia afflicts ~1% of the population worldwide. There is little published information concerning outcomes of initial treatment for breast cancer in schizophrenic patients.

Methods: We searched the VA Patient Treatment File for fiscal years 1999-2005 based on computer codes for the diagnoses of schizophrenia and subsequent breast cancer. Chart-based data were also obtained. For the resulting SPSS database, the control group was drawn from a report of breast cancer treatment outcomes that used VA National Surgical Quality Improvement Program (NSQIP) data (JACS, 2004;198:707).

Results: Our computer search identified 126 patients. 58 met predetermined criteria. 17 of the 58 (29%) had a diagnosis of major depression in addition to schizophrenia. In the 51 for whom data about smoking were available, 28 (55%) were current smokers vs. 30 of 143 (21%) in the NSQIP series. Of the 44 patients for whom data on obesity were available, 32 (73%) were considered obese. In 19 of the 58 patients (33%) there was documentation of a significant delay (months to years) in diagnosis and/or treatment, including 8 (14%) who refused all medical care; there were no comparable data in the control group regarding obesity or treatment delay. For patients with adequate staging data, more late-stage disease (TNM stages III-IV) was observed [18 of 39 (46%) in our series vs. 7 of 85 (8%) in the NSQIP series]. Before hospitalization, 9 of the 58 patients (16%) were documented as having verbally attacked a healthcare worker; 6 (10%) also had physically assaulted a healthcare worker. Despite measures to optimize schizophrenia management, 6 of the 58 patients (10%) exhibited disruptive behavior during hospitalization.

Conclusions: Schizophrenics do not understand their health needs well. They commonly show active hostility toward health care workers. Schizophrenics comply poorly with medical advice, leading to late diagnosis, suboptimal treatment, and poor outcomes.