Use of Long-Acting Antipsychotic Treatments in Community Telepsychiatry: Study to Assess Knowledge, Attitudes, and Perceived Barriers From Patients', Caregivers', and Providers' Perspective in South Carolina (LATITUDE Study)

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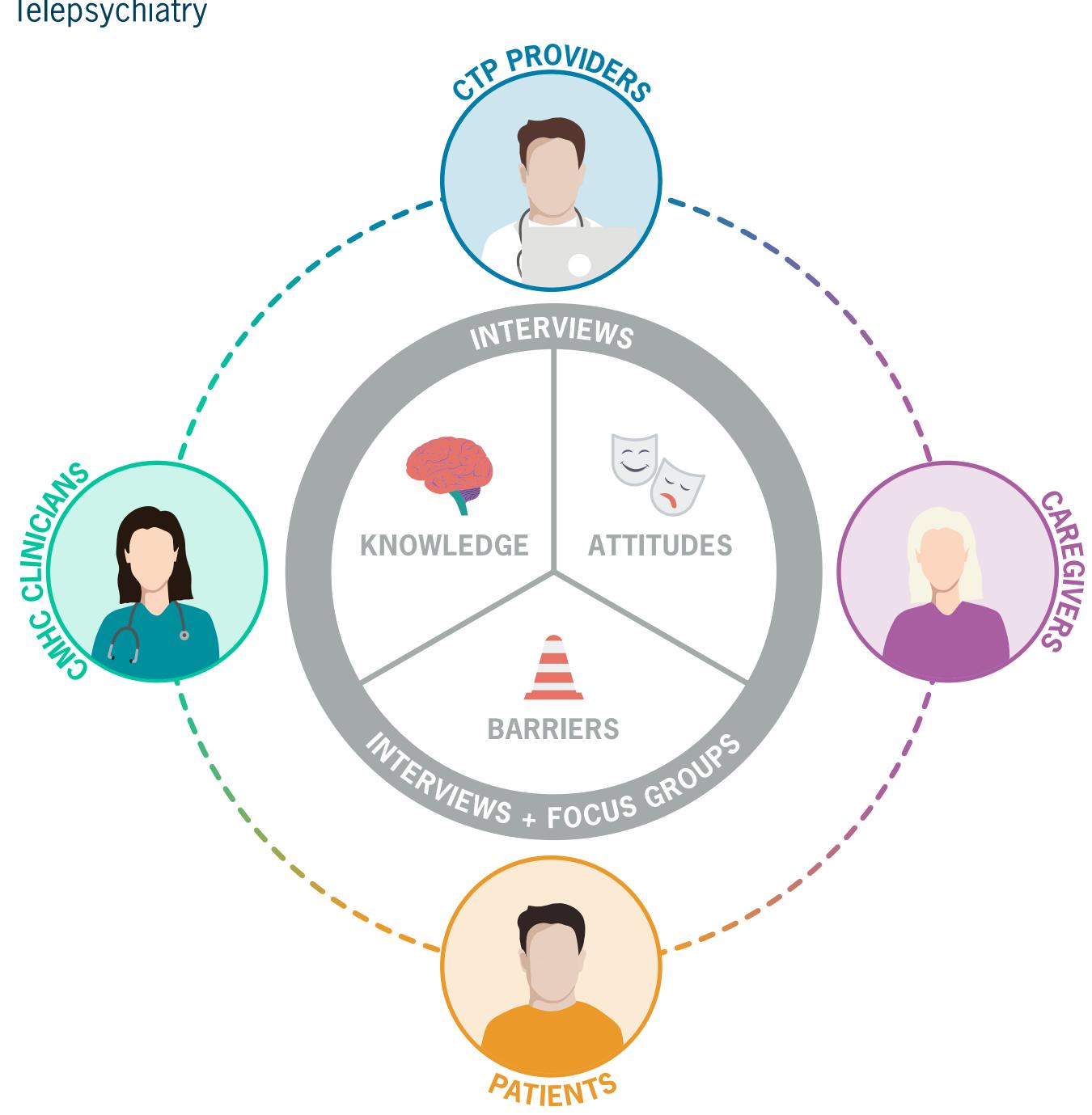
INTRODUCTION

- The South Carolina Department of Mental Health instituted a Community Telepsychiatry Program (CTP) in 2013
- In-person administration requirements of long-acting injectable (LAI) antipsychotics, agents that are effective treatment options for patients with schizophrenia,2 may add barriers to their use in the context of telepsychiatry services
- Currently, there is no established model for the use of LAI antipsychotics in conjunction with telepsychiatry for patients with schizophrenia

OBJECTIVE

- The Long-Acting Antipsychotic Treatments in Community Telepsychiatry: Knowledge, Attitudes, and Perceived Barriers from Patients', Caregivers', and Providers' Perspective (LATITUDE) study used quantitative surveys of CTP providers (psychiatrists providing telepsychiatry consultation), as well as qualitative interviews with CTP providers, community mental health center (CMHC) clinicians, adult caregivers, and adults with schizophrenia to provide a 360-degree perspective on LAI antipsychotic use in telepsychiatry (**Figure 1**)
- We present qualitative data from the participants in the LATITUDE study

Figure 1. LATITUDE 360-Degree Perspective on LAI Antipsychotic Use in



CMHC, community mental health center; CTP, Community Telepsychiatry Program; LAI, long-acting injectable.

METHODS

- LATITUDE is a cross-sectional, noninterventional study that followed standards of community-based participatory research principles and was conducted in collaboration with the Prisma Health - University of South Carolina Medical Group, South Carolina Department of Mental Health, and National Alliance on Mental Illness
- Interviews were conducted with CTP providers, CMHC clinicians, caregivers, and patients with schizophrenia; a semi-structured interview guide was developed for each participant group
- Two focus groups were conducted with patients with schizophrenia; a moderator guide was adapted for the patient focus groups
- Major themes included the benefits, facilitators, and perceived barriers to using LAI antipsychotics, telepsychiatry, and LAI antipsychotics in the context of telepsychiatry services

Study Population

- Eligible individuals were:
- CTP providers affiliated with the South Carolina Department of Mental Health for at least 1 month and licensed to prescribe medication
- CMHC clinicians (eg, nurses, case managers) who were part of the CTP team and involved in the care of patients with SMI
- Adult caregivers who provided care for a patient with SMI
- Adult patients with schizophrenia who were prescribed antipsychotic medication within the past 2 years and who were amenable to telepsychiatry treatment

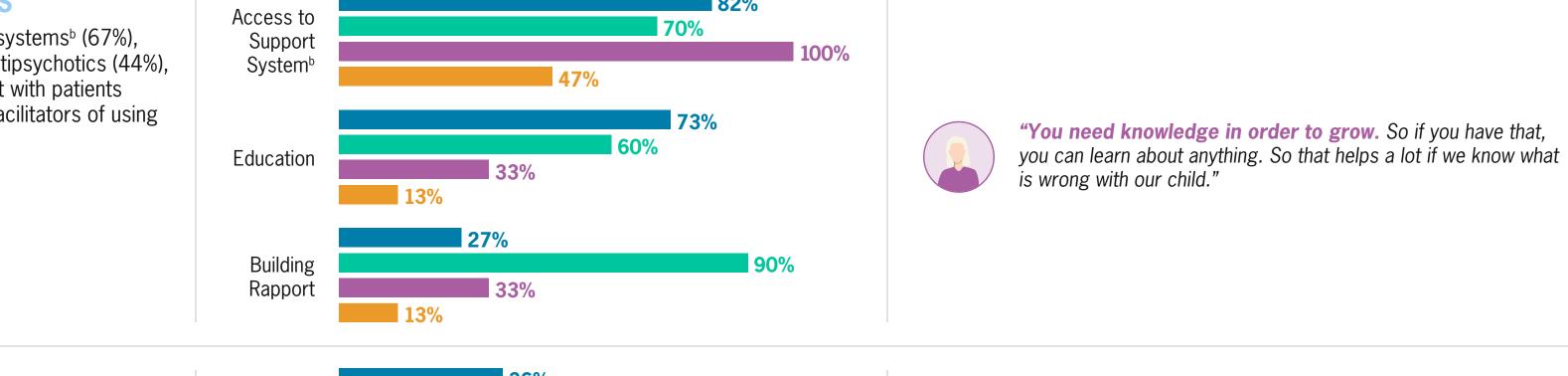
Data Analysis

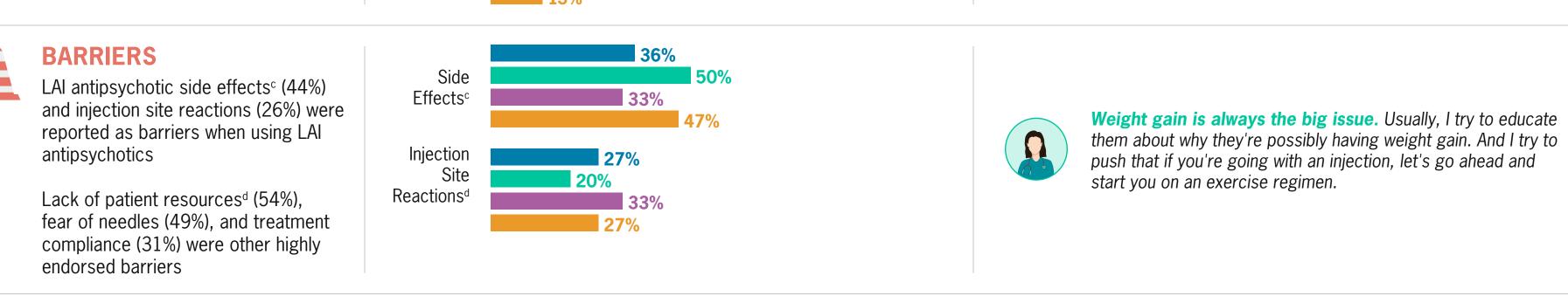
- Transcripts of audio recordings were coded using content thematic analysis with grounded theory methods,^{3,4} and emerging themes and subthemes were collated
- Analyses were descriptive in nature, and no a priori hypotheses were tested
- Quotes obtained from participants were edited slightly for clarity

RESULTS

- The study enrolled 11 CTP providers, 10 CMHC clinicians, 3 caregivers, and 15 patients with schizophrenia between October 2021 and January 2022
- Demographic characteristics of participants are presented in Supplemental Tables 1–3, accessible via the QR Code at the bottom of this poster
- All 15 patients with schizophrenia were receiving LAI antipsychotics at the time of their participation in LATITUDE
- For patients receiving LAI antipsychotics, these agents were viewed as beneficial, in part because of increased medication compliance and effective symptom control Access to support systems was reported as a facilitator of LAI antipsychotic use, but side effects were perceived as barriers to LAI treatment in patients (Figure 2)
- Major themes associated with telepsychiatry were the benefit of expanded access to mental health services; however, patient hesitancy and technology challenges were perceived as barriers to telepsychiatry use (Figure 3)
- CTP providers reported that patient compliance was a benefit of LAI antipsychotics and that a hybrid model of care with virtual and in-person visits facilitated the use of these agents in telepsychiatry
- However, logistical challenges, such as the inability to walk a patient down to the nurse for their LAI antipsychotic injection after a virtual appointment, was a perceived drawback (Figure 4)

Figure 2. Themes Associated With LAI Antipsychotics LAI ANTIPSYCHOTICS "If [the patient has] the injectable, I know the medicine is on board. So if it's not working, I think it's the medicine." Overall, for patients who were on LAI antipsychotics, the main benefits "They come in, they get their injections, and they tell everybody here and in the community, 'I can't go without my shot. If I don't get my shot, I'm going to get sick and be back in the hospital."" (67%), effective symptom contro (62%), and convenience (36%) Other themes included fewer "It makes my head clearer. I can be able to think and not [be] Access to support systems^b (67%)





dyskinesia, amenorrhea, and galactorrhea. Examples include the inability to pay for treatment, lack of treatment, lack of support from patients' families, and transportation and housing issues. CMHC, community mental health center; CTP, Community Telepsychiatry Program; LAI, long-acting injectable.

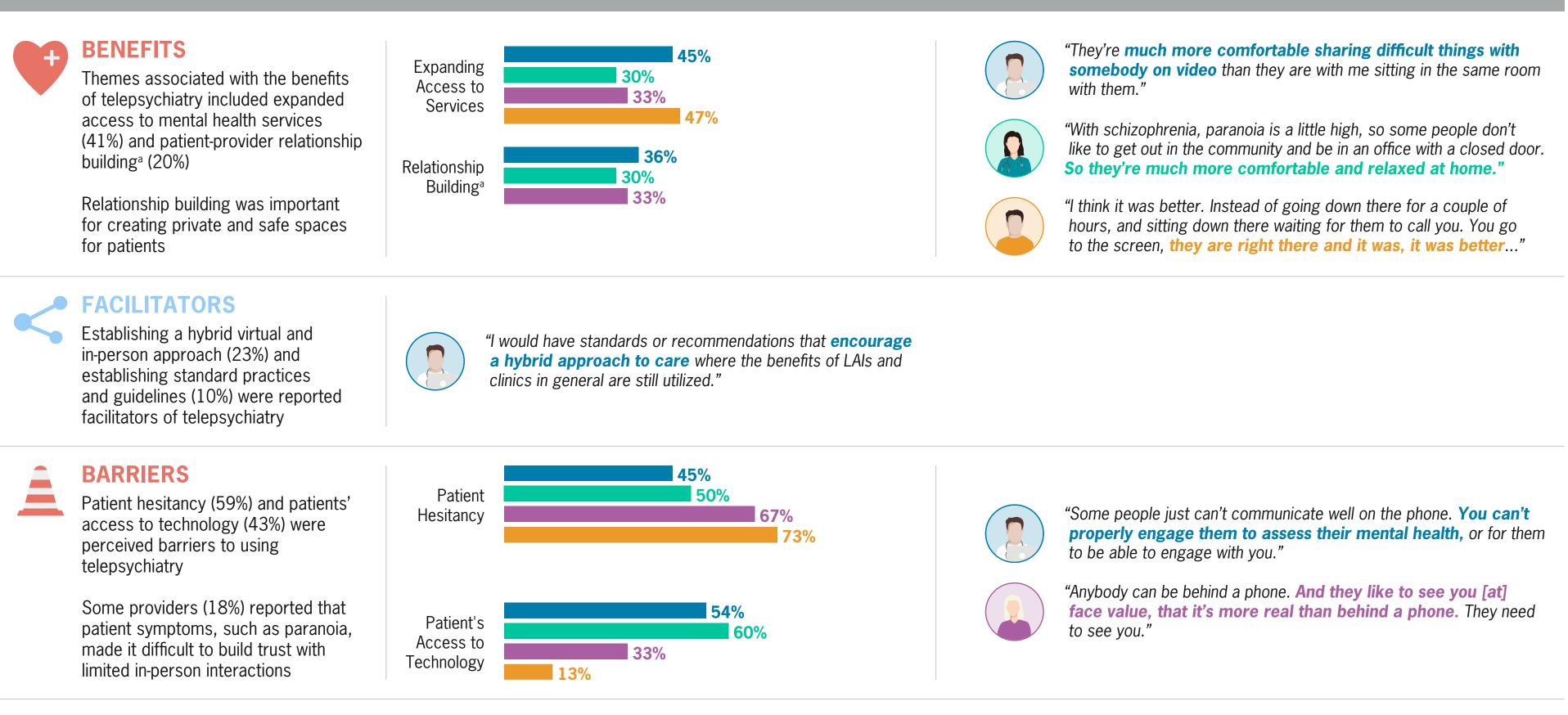
CTP PROVIDERS CMHC CLINICIANS CAREGIVERS PATIENTS

Figure 3. Themes Associated With Telepsychiatry **TELEPSYCHIATRY**

^aThis theme was not mentioned by patients during interviews or focus groups.

CMHC. community mental health center; CTP, Community Telepsychiatry Program; LAI, long-acting injectable

RESULTS (continued)



CTP PROVIDERS CMHC CLINICIANS CAREGIVERS PATIENTS

Figure 4. Themes Associated With LAI Antipsychotic Use in Telepsychiatry

USING LAI ANTIPSYCHOTICS IN TELEPSYCHIATRY





















The use of LAI antipsychotics in telepsychiatry was not mentioned by caregivers. CMHC, community mental health center; CTP, Community Telepsychiatry Program; LAI, long-acting injectable.

LIMITATIONS

lack of shareable resources

- Results based on the well-established CTP of the South Carolina Department of Mental Health may not be generalizable to other geographic areas or mental health care systems
- The CTP provides only outpatient care; therefore, LAI antipsychotics initiated on an inpatient basis were not assessed
- All patients were on LAI antipsychotics and were amenable to telepsychiatry; thus, their perceptions and experiences may not represent those of the broader population of patients who may not have tried an LAI antipsychotic
- Individual LAI antipsychotics have unique efficacy, safety, and tolerability profiles; patients' and caregivers' perceptions may have been based on experiences with individual medications and may not be generalizable to all LAI antipsychotics
- Small sample sizes may limit the generalizability of the findings to larger groups of providers, clinicians, caregivers,
- Caregivers and patients may have been known to the referring providers, which may have introduced potential selection bias
- The COVID-19 pandemic may have influenced perceptions of telepsychiatry that may not be generalizable

CONCLUSIONS

- LATITUDE is one of the first studies to examine the use of LAI antipsychotics in telepsychiatry using a 360-degree approach that integrates the perspectives of mental health care providers, caregivers of patients with SMI, and patients with schizophrenia on LAI antipsychotics
- Participants endorsed several benefits of LAI antipsychotics, including increased medication compliance, but also noted the presence of barriers to their use, such as fear of needles and treatment side effects
- Overall, impressions of telepsychiatry were positive; the main barriers to telepsychiatry use included patient hesitancy, logistical concerns, and perceptions by both CTP providers and CMHC clinicians that patients had challenges accessing technologies for appointments
- CTP providers endorsed hybrid virtual and in-person treatment approaches that allow flexibility in seeing patients but that require improvements in support services for administering LAI antipsychotics after virtual appointments
- The LATITUDE study highlights gaps in the field of telepsychiatry, as well as facilitators that may be helpful to healthcare administrators, providers, and clinicians in developing practice guidelines and strategies that support LAI antipsychotic utilization via community telepsychiatry

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AUTHOR DISCLOSURES

Batool A. Haider, Elizabeth Keane, Amy Claxton, Sergey Yagoda, and Brittany D. Roy are or were employees of Alkermes, Inc., and may be shareholders in the company. Meera Narasimhan, Suzanne Hardeman, and Casey Childers have served as consultants or on an advisory board for Alkermes.

Amanda Edgar reports no potential conflicts of interest.

Cory Saucier is an employee of QualityMetric, which received funding for the conduct of the LATITUDE study.

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