

Schizophrenia Clinical Guideline

MVP Health Care® (MVP), as part of its continuing Quality Improvement Program, has adopted the American Psychiatric Association’s (APA) Practice Guideline for the Treatment of Patients With Schizophrenia.¹ The full guideline is available at:

<https://psychiatryonline.org/doi/pdf/10.1176/appi.books.9780890424841>

Impact of the Condition

The estimated prevalence of schizophrenia and related psychotic disorders in the United States ranges between 0.25% and 0.64%^{2,3}. The illness has a different pattern of incidence between men and women. Males generally have a one-time peak incidence of diagnosis between the ages of 18 to 25, while females have a bimodal pattern of susceptibility with diagnosis occurring between the ages of 25 to 30 and then again around 40 to 45 years of age. Despite its relatively low prevalence, individuals who suffer with schizophrenia experience significant health, social and economic burden. It is estimated individuals with schizophrenia suffer premature mortality by approximately 28.5 years compared to the general population.³ Additional contributing co-morbidities include heart disease, liver disease and diabetes, and oftentimes these conditions are underdiagnosed and undertreated. It is also estimated about 4.9% of individuals who suffer with schizophrenia die by suicide and about half suffer with co-occurring mental health and substance use disorders. There are also disproportionately high costs related to the “direct” costs of health care, as well as to the “indirect” costs related to lost productivity, criminal justice involvement and social service needs.

Summary of the APA Guideline

MVP adopted the APA guideline which offers practitioners and patients evidence-based treatment options for individuals who suffer with schizophrenia. The guideline begins with an assessment and determination of the treatment plan taking into consideration a patient’s individual goals and preferences. Evidence-based pharmacotherapeutic interventions, including long-acting injectable antipsychotic medications, are provided along with considerations for how to approach nonresponse or partial response to medications, as well as treatment-emergent side effects. Evidence is provided for the use of clozapine in treatment-resistant schizophrenia, and for individuals who suffer with schizophrenia and have a substantial risk for suicide and/or aggressive behavior. Non-pharmacological interventions to include coordinated specialty care programs, cognitive-behavioral therapy, psychoeducation, supported employment services, assertive community treatment, family interventions, self-management skills and recovery-focused interventions, cognitive remediation and social skills training are also recommended.

Additional tools to assist providers with educating their patients on behavioral health conditions are included in the Provider Quality Improvement Manual under Behavioral Health.

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In conjunction with these guidelines, MVP Health Care offers Case Management for members with behavioral health conditions. If you would like to refer your patients to the Case Management program, please call the MVP Case Management Department at **1-800-852-7826**.

This guideline is not intended to replace the role of clinical judgment by the physician in the management of this, or any other disease entity. It is an educational guideline to assist in the delivery of good medical care. All treatment decisions are ultimately up to the physician. Where medication recommendations are made, please refer to each health plan's formulary for coverage considerations.

MVP Health Care updates its clinical guidelines at least every two years. The review process is also initiated when new scientific evidence or national standards are published. Practitioners are alerted via the web site and by written notices from the plan via fax or newsletter. A hard copy of the clinical guideline can be requested by calling the MVP Quality Improvement Department at **(800) 777-4793 extension 1-2247**.

1. American Psychiatric Association (APA) Practice Guideline for the Treatment of Patients with Schizophrenia, 2021. Available:
<https://psychiatryonline.org/doi/pdf/10.1176/appi.books.9780890424841>
2. National Alliance on Mental Illness: Schizophrenia. Available:
<https://www.nami.org/About-Mental-Illness/Mental-Health-Conditions/Schizophrenia>
3. National Institutes of Health. National Institute of Mental Health. Health & Education. Statistics. Burden of Schizophrenia. Available:
<https://www.nimh.nih.gov/health/statistics/schizophrenia.shtml>