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Deputy Mark Ward,  
Dail Eireann,  
Leinster House,  
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7<sup>th</sup> March 2023

**PQ Number: 4146/23**

**PQ Question: To ask the Minister for Health if there is a national standard for the monitoring of antipsychotic medication; if he will outline the process by which a national standard could be developed; the current standards followed; the enforcement of these standards; and if he will make a statement on the matter. -Mark Ward**

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Deputy Ward,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted for response. I have examined the matter and the following outlines the position.

#### **Anti-psychotic medication**

Antipsychotic medication is an evidence based treatment for a number of mental health conditions. These include schizophrenia and other psychotic disorders. They also have an evidence base for use in the treatment of bipolar affective disorder and depression. Research indicates that 4 out of 5 people with severe mental illness, who take antipsychotics, find they are successful in alleviating their symptoms.

Antipsychotics remain the best evidence-based treatments for psychotic disorders, and reduce mortality rates compared to no treatment, but they can have an adverse impact on multiple aspects of physical health e.g. weight gain, raised sugar levels in the blood.

- Currently in Ireland we do not have a national standard for monitoring of antipsychotic medication.
- However, there are a number of international prescribing and monitoring guidelines that are well established and would be followed by Irish prescribers e.g. the NICE guidelines in the UK. <https://www.nice.org.uk/guidance/qs102/chapter/quality-statement-6-monitoring-for-side-effects-of-antipsychotic-medication>

The Early Intervention for Psychosis National Clinical Programme, Model of Care, 2019 does make recommendations about the initiation and monitoring of antipsychotic medication. These recommendations include:

1. The prescribing medical practitioner should discuss the use of appropriate medication with the service user and family/carer, highlighting both the benefits and expected side-effects of the medication, including effects on appetite, weight, sleep, extrapyramidal symptoms and the known metabolic effects of many antipsychotic medicines.
2. All individuals started on an antipsychotic medication need to have a baseline set of physical health assessments completed e.g. weight, height, blood pressure, blood tests. These should be repeated at 3 months and then annually. The Model of Care also recommends that any abnormal results in these assessments should be referred on for intervention e.g. smoking cessation, nutritional advice, further input by General practitioner/ hospital specialist. Shared care between general practice and secondary care mental health services is essential.

The National Clinical Audit of Psychosis (NCAP) is commissioned by the Healthcare Quality Improvement Partnership (HQIP) as part of the National Clinical Audit and Patient Outcomes Programme (NCAPOP) in the UK. Four of the five Early Intervention in Psychosis teams in Ireland have participated in this national audit for the past three years. In this audit Early Intervention in Psychosis (EIP) services are measured against criteria relating to the care and treatment they provide, so that the quality of care can be improved. <https://www.hse.ie/eng/about/who/cspd/ncps/mental-health/psychosis/resources/>

In 2022, 'once off' Ministerial funding provided for the introduction of Point of Contact testing devices in each of the 5 EIP teams. These devices allow teams to measure blood sugars and lipids via a finger prick test. The results of the testing are available in minutes. This will allow physical health monitoring and if required referrals for interventions to occur in the one meeting. This project commenced in 2022 and will be evaluated in 2023.

I trust this information is of assistance to you.

Yours sincerely,



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**Dr Amir Niazi**  
**National Clinical Advisor & Group Lead for Mental Health**  
**Clinical Design and Innovation**  
**Health Service Executive**