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ing out the discrepancy patients may demonstrate between their behavior and their expressed priorities. "If they say they're here to see you about their health, yet they're not ready to quit smoking... say, 'quitting smoking is the one thing you can do that is most effective for your health.'"

If patients resist the notion to quit, "roll with it. It's not for you to try to convince them to change their behavior." But make sure to bring up smoking in their next office visit. "Sometime I tell my patients, 'every time you see my face I want you to think, quit smoking,'" said Dr. Jaén, who is also a member of AAFP's Tobacco Cessation Advisory Committee.

## Antipsychotics Raise Need for Health Checks

BARCELONA — More than 20% of patients taking antipsychotic medications for schizophrenia were at risk for diabetes, more than 30% had undiagnosed hyperlipidemia, and more than 50% had undiagnosed hypertension, a large European epidemiologic study has found.

The findings drive home the need for continuous monitoring of patients taking these drugs, Dr. Marc de Hert and his colleagues wrote in a poster presented at the annual congress of the European College of Neuropsychopharmacology.

The observational study was launched in 2006; it included 2,270 patients with schizophrenia recruited in 12 European countries. Patients made a single clinic visit, during which they underwent a metabolic workup that included measurement of fasting blood glucose, weight, waist, hips, and blood pressure. The patients' median age was 41; 55% were male. Most (76%) had paranoid schizophrenia; the median duration of illness was 11 years.

The most frequently used typical antipsychotics were haloperidol (48%) and zuclopenthixol (20%). The most frequently used atypicals were risperidone (25%), olanzapine (23%), clozapine (19%), amisulpride (17%), and quetiapine (12%).

Only 4% of the patients had a diagnosis of diabetes, yet an additional 24% either had or were at risk of the disorder, wrote Dr. de Hert of the Catholic University Louvain (Belgium). Of these 559 patients, 75 had a fasting blood glucose of at least 126 mg/dL, consistent with diabetes, and 484 presented with an impaired fasting glucose of 100-126 mg/dL. Seven percent (161) previously had been diagnosed with hyperlipidemia. However, an additional 54% of the cohort had undiagnosed hyperlipidemia at the time of the exam.

Hypertension previously had been diagnosed in 248 patients. But at the study visit, an additional 738 patients (32%) had elevated blood pressures; elevations were significantly more likely in those taking a typical than an atypical antipsychotic.

The incidence of metabolic syndrome was similar in both groups (37%).

This study was sponsored and funded by Sanofi-Aventis.

—Michele G. Sullivan

Physicians can support self-efficacy by helping patients identify and build on past successes. Quitting "doesn't have to happen all at once. It can be changing smoking patterns, asking the patient to share his or her ideas about quitting strategies, or calling the quitline. There are multiple ways to get to the point where they are ready to quit," he said.

If patients are keen to quit but aren't ready for intensive interventions, then offer practical counseling interventions such as recommending that they throw away all of their ashtrays and cigarette butts on the day they decide to quit, said Dr. Jaén. Other tips include advising patients not to

have cigarettes in their car, to walk instead of sitting down after a meal, and to brush



**'Help the patient understand you know that quitting smoking is a very difficult thing to do.'**

DR. JAÉN

their teeth when they crave a cigarette.

He emphasized the importance of social support, saying he urges patients to tell

family members, friends, and coworkers about their decision to quit. "Call them up, and ask how they're doing," he added.

Dr. Jaén said he also warns patients not to consume alcohol when they're in the early stages of quitting, "because alcohol and nicotine are synergistic. Once people start drinking, it's hard for them to stay off cigarettes, especially early on. If people have conflicted relationships, maybe they should avoid that person for a while, too."

A package of 200 quitline referral cards is available free to AAFP members. The cost for nonmembers is \$50 plus shipping. For information, call 800-944-0000 and request item number 966. ■

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