



COVID-19 Pandemic Guidance Document

USE OF LONG-ACTING INJECTABLES AS A CLINICALLY NECESSARY TREATMENT

Prepared by the APA Committee on the Psychiatric Dimensions of Disaster and COVID-19

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During this COVID-19 pandemic the APA encourages hospitals and other facilities to include the ongoing use of long-acting injectables (LAI) for patients with high-risk chronic illness as a necessary procedure.

In the current COVID-19 pandemic, it has been reported that the administration of LAI has been suspended in some areas due to it being considered an elective procedure. However, the role of LAI is a clinically necessary treatment and should be continued for patients with chronic mental illness.

While we recognize that there are some patients for whom it is clinically prudent to switch to an oral medication, there are others for whom that change would be deeply destabilizing. Individuals with serious mental illness are at much higher risk of morbidity and mortality even when provided continuous, stabilizing treatment; withdrawal of this treatment would likely increase their risk of physical and psychiatric decompensation.

In the context of a pandemic, these risks are significantly elevated due to reduced natural supports, reduced access to outpatient treatment including pharmacy services and the risk of exposure to the coronavirus with increased contacts with the community, healthcare, and criminal justice system. For many with severe and chronic mental illness, the use of these long-acting formulations can reduce personal suffering and distress, especially in a pandemic; for others, it has also reduced disorganized or impulsive behaviors that put them at risk of physical injury, aggression, utilization of emergency rooms or incarceration. LAI can also help ensure adequate level of functioning and cognitive processing which would enable these patients to practice social distancing in a pandemic.

We recognize the critical importance of social distancing and the need to limit unnecessary exposure to protect the safety of patients and our healthcare workers. We want to ensure that clinics are seeing patients as infrequently as is medically prudent, to limit the possibility of exposure to the coronavirus for both patients and staff, and to limit the use of PPE.

During the present COVID-19 crisis, where there is a need to temporarily avoid non-urgent office visits and procedures, it is understandable that continued use of LAI medication be limited to situations in which the individual would predictably have an adverse outcome with a transition to oral medication or would have barriers to access oral medication. For example, continued use of LAI medication may be recommended for an individual unwilling to take oral medication, with a history of past decompensation (including hospitalization, agitation, violence, arrest, relapse or overdose) when taken off of an LAI formulation, or who is not easily reached by phone or electronic messaging for follow-up/monitoring during and after the switch.

REFERENCE

North Carolina Psychiatric Association. Position Statement on Long Acting Injectables, March 2020.