

## 抗精神病薬治療中の統合失調症患者におけるインスリン過剰分泌

### Excessive insulin secretion in Japanese schizophrenic patients treated with antipsychotics, despite normal fasting glucose levels

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The development of impaired glucose tolerance induced by antipsychotics (APs) is of concern as a serious side effect of psychiatric drug therapy. However, the mechanism by which APs cause dysfunction of the glucose-insulin response is not fully understood. Recent studies have shown patients treated with APs for schizophrenia were more likely to exhibit impaired glucose tolerance after a glucose load compared with healthy control subjects, even if fasting glucose levels were within the normal range. To explain these findings, we hypothesized that insulin secretion is increased in AP-treated schizophrenic patients, even those with normal fasting glucose (NFG) levels. Therefore, oral glucose tolerance tests were conducted in 159 Japanese inpatients with AP-treated schizophrenia and in 90 healthy subjects without schizophrenia. Plasma glucose and serum insulin concentrations were measured before (0 minutes) and at 30, 60, 90 and 120 minutes after the oral glucose load. Although insulin levels at 0 min were similar in both groups of subjects, insulin levels were significantly higher in AP-treated patients at all times after the glucose load than in healthy subjects. In analyses of NFG subjects, insulin levels were significantly higher in AP-treated patients compared with healthy subjects at all times after glucose loading. Overall, we found that insulin secretion in response to a glucose load was significantly higher in AP-treated patients, irrespective of NFG. These results suggest that APs affect the glucose-insulin response, which may lead to subclinical insulin resistance before the onset of overt glucose intolerance.