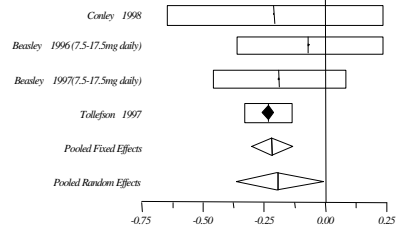
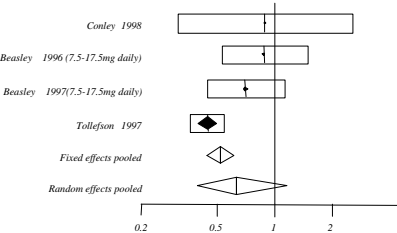
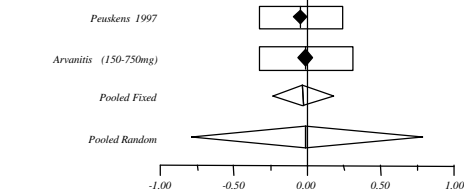
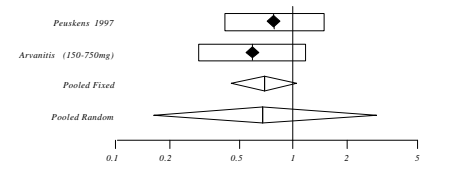
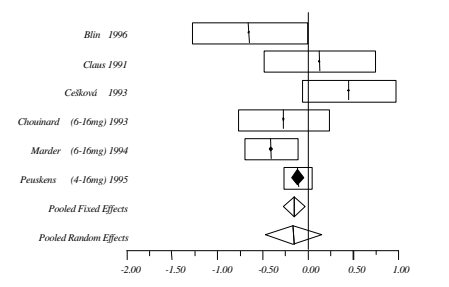
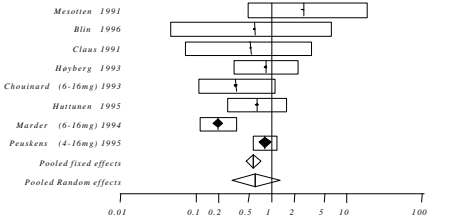
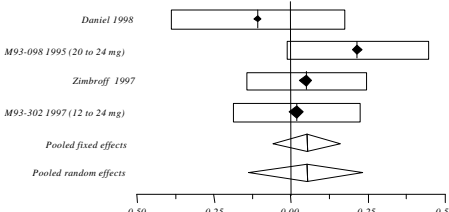
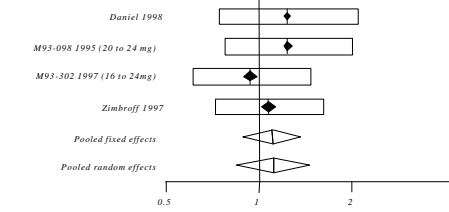


		Favours atypical	Favours conventional
<p><b>Amisulpiride</b></p> <p><i>Efficacy</i></p> <p>4 short term trials (603 participants) (refs w7-w9)</p>	<p>Overall symptom reduction: standardised weighted mean difference (95% CI) -0.35 (-0.52 to -0.18) (Equivalent in terms of Brief Psychiatric Rating Scale score: 5.2 points)</p> <p>Positive symptoms: standardised weighted mean difference -0.25 (-0.42 to -0.07) Negative symptoms: standardised weighted mean difference -0.28 (-0.45 to -0.10)</p>		
<p><i>Tolerability</i></p> <p>4 short term trials (603 participants) (refs w7-w9)</p>	<p>Drop-out: Fixed effects OR (95% CI):0.55 (0.38 to 0.79)</p> <p>Number needed to treat: 9 (95% CI 5 to 22)</p>		
<p><b>Clozapine</b></p> <p><i>Efficacy</i></p> <p>12 trials (1253 participants) (refs 20-w6, w11-w18)</p>	<p>(Data from short-term trials pooled) Overall symptom reduction standardised weighted mean difference -0.68 (95% CI -0.82 to -0.55) (Equivalent in terms of Brief Psychiatric Rating Scale score: 8.7 points)</p> <p>Positive symptoms: data not available Negative symptoms: data not available</p>		
<p><i>Tolerability</i></p> <p>20 trials (1724 participants) (refs 20, 27-43)</p>	<p>Drop-out: Fixed effects OR: 0.52 (95% CI 0.40 to 0.67)</p> <p>Number need to treat (short term trials) : 31 (95% CI 14 to 200)</p> <p>Number need to treat (long term trials) : 4 (95% CI 2 to 5)</p>		

<p><b>Olanzapine</b></p> <p><i>Efficacy</i></p> <p>4 short-term trials (2471 participants) (refs w28-w31)</p>	<p>Overall symptom reduction Fixed effects standardised weighted mean difference <math>-0.22</math> (95% CI: <math>-0.30</math> to <math>-0.14</math>) (Equivalent in terms of Brief Psychiatric Rating Scale score: 2.9 points)</p> <p>Positive symptoms Fixed effects standardised weighted mean difference <math>-0.13</math> (95% CI: <math>-0.21</math> to <math>-0.05</math>)</p> <p>Negative symptoms Fixed effects standardised weighted mean difference <math>-0.19</math> (95% CI: <math>-0.27</math> to <math>-0.11</math>)</p>	 <p>Forest plot for Olanzapine efficacy. The x-axis represents the standardized weighted mean difference, ranging from -0.75 to 0.25. The y-axis lists studies: Conley 1998, Beasley 1996 (7.5-17.5mg daily), Beasley 1997 (7.5-17.5mg daily), Tollefson 1997, Pooled Fixed Effects, and Pooled Random Effects. Individual study estimates are shown as squares with horizontal error bars for 95% CIs. Pooled estimates are shown as diamonds. The overall pooled fixed effects estimate is approximately -0.22, and the pooled random effects estimate is approximately -0.20.</p>
<p><i>Tolerability</i></p> <p>4 short-term trials (2471 participants) (refs w28-w31)</p>	<p>Drop-out: Fixed effects OR 0.52 (95% CI: 0.44 to 0.61)</p> <p>Random OR 0.63 (95% CI: 0.40 to 1.17)</p> <p>Number needed to treat: 7 (95% CI: 6 to 9)</p>	 <p>Forest plot for Olanzapine tolerability. The x-axis represents the Odds Ratio (OR) on a log scale, ranging from 0.2 to 5. The y-axis lists studies: Conley 1998, Beasley 1996 (7.5-17.5mg daily), Beasley 1997 (7.5-17.5mg daily), Tollefson 1997, Fixed effects pooled, and Random effects pooled. Individual study estimates are shown as squares with horizontal error bars for 95% CIs. Pooled estimates are shown as diamonds. The overall pooled fixed effects OR is 0.52, and the pooled random effects OR is 0.63.</p>
<p><b>Quetiapine</b></p> <p><i>Efficacy</i></p> <p>2 short-term trials (449 participants) (refs w32,w33)</p>	<p>Overall symptom reduction: fixed effects standardised weighted mean difference: <math>-0.03</math> (95% CI <math>-0.23</math> to <math>0.18</math>)</p> <p>Positive symptoms: fixed effects standardised weighted mean difference: <math>0.008</math> (95% CI <math>-0.302</math> to <math>0.317</math>)</p> <p>Negative symptoms: fixed effects standardised weighted mean difference: <math>0.23</math> (95% CI <math>-0.07</math> to <math>0.54</math>)</p>	 <p>Forest plot for Quetiapine efficacy. The x-axis represents the standardized weighted mean difference, ranging from -1.00 to 1.00. The y-axis lists studies: Peuskens 1997, Arvanitis (150-750mg), Pooled Fixed, and Pooled Random. Individual study estimates are shown as squares with horizontal error bars for 95% CIs. Pooled estimates are shown as diamonds. The overall pooled fixed effects estimate is approximately -0.03, and the pooled random effects estimate is approximately 0.008.</p>
<p><i>Tolerability</i></p> <p>2 short-term trials (449 participants) (refs w32, w33)</p>	<p>Drop-out: Fixed effect OR 0.70 (95% CI: 0.46 to 1.06)</p>	 <p>Forest plot for Quetiapine tolerability. The x-axis represents the Odds Ratio (OR) on a log scale, ranging from 0.1 to 5. The y-axis lists studies: Peuskens 1997, Arvanitis (150-750mg), Pooled Fixed, and Pooled Random. Individual study estimates are shown as squares with horizontal error bars for 95% CIs. Pooled estimates are shown as diamonds. The overall pooled fixed effects OR is 0.70, and the pooled random effects OR is approximately 0.70.</p>

<p><b>Risperidone</b></p> <p><i>Efficacy</i> 6 short-term trials (1611 participants) (refs w34-w39) and two long term trials (840 participants) (refs 17, w2)</p>	<p>Overall symptom reduction: Fixed effects standardised weighted mean difference -0.15 (95% CI -0.27 to -0.04) Random effects standardised weighted mean difference -0.16 (95% CI -0.47 to 0.16)</p> <p>Positive symptoms Fixed effects standardised weighted mean difference -0.12 (95% CI: -0.24 to 0.00) Negative symptom Fixed effects standardised weighted mean difference -0.15 (95% CI: -0.27 to -0.03)</p>	 <p>Forest plot for Risperidone efficacy. The x-axis represents the standardized weighted mean difference, ranging from -2.00 to 1.00. The y-axis lists studies: Blin 1996, Claus 1991, Celkovi 1993, Chouinard (6-16mg) 1993, Marder (6-16mg) 1994, Peuskens (4-16mg) 1995, Pooled Fixed Effects, and Pooled Random Effects. Each study is represented by a diamond (point estimate) and a horizontal line (95% CI). The pooled fixed effects diamond is centered at -0.12, and the pooled random effects diamond is centered at -0.16.</p>
<p><i>Tolerability</i></p> <p>10 short term trials (2138 participants) (refs w34-w43)</p>	<p>Drop -out : Fixed effects OR 0.59 (95% CI: 0.46 to 0.74) Random effects OR: 0.62 (95% CI: 0.31 to 1.34)</p> <p>Number needed to treat: 11 (95% CI: 7 to 19)</p>	 <p>Forest plot for Risperidone tolerability. The x-axis represents the Odds Ratio (OR) on a logarithmic scale from 0.01 to 100. The y-axis lists studies: Mesotten 1991, Blin 1996, Claus 1991, Hayberg 1993, Chouinard (6-16mg) 1993, Huttunen 1995, Marder (6-16mg) 1994, Peuskens (4-16mg) 1995, Pooled fixed effects, and Pooled Random effects. Each study is represented by a diamond (point estimate) and a horizontal line (95% CI). The pooled fixed effects diamond is centered at 0.59, and the pooled random effects diamond is centered at 0.62.</p>
<p><b>Sertindole</b></p> <p><i>Efficacy</i></p> <p>4 trials (3 short term; 1 12 month; 1549 participants) (refs w3, w44-w46)</p>	<p>Overall symptom reduction: fixed effects standardised weighted mean difference 0.05 (95% CI: -0.06 to 0.16) Positive symptoms Negative symptoms</p>	 <p>Forest plot for Sertindole efficacy. The x-axis represents the standardized weighted mean difference, ranging from -0.50 to 0.50. The y-axis lists studies: Daniel 1998, M93-098 1995 (20 to 24 mg), Zimbroff 1997, M93-302 1997 (12 to 24 mg), Pooled fixed effects, and Pooled random effects. Each study is represented by a diamond (point estimate) and a horizontal line (95% CI). The pooled fixed effects diamond is centered at 0.05, and the pooled random effects diamond is centered at 0.05.</p>
<p><i>Tolerability</i></p> <p>4 trials (1549 participants) (res w3, w44-w46)</p>	<p>Drop-out: Fixed effects OR 1.10 (95% CI 0.89 to 1.36)</p>	 <p>Forest plot for Sertindole tolerability. The x-axis represents the Odds Ratio (OR) on a logarithmic scale from 0.5 to 5. The y-axis lists studies: Daniel 1998, M93-098 1995 (20 to 24 mg), M93-302 1997 (16 to 24mg), Zimbroff 1997, Pooled fixed effects, and Pooled random effects. Each study is represented by a diamond (point estimate) and a horizontal line (95% CI). The pooled fixed effects diamond is centered at 1.10, and the pooled random effects diamond is centered at 1.10.</p>

Effect of atypical drugs compared with conventional antipsychotic drugs on efficacy and tolerability in patients with schizophrenia or related disorders (trials with no events not displayed)

(Equivalent Brief Psychiatric Rating Scale point difference and numbers need to treat presented when estimates of 95% confidence interval excludes 1 for both fixed and random effects models)

Number needed to treat indicates the number of patients that would be treated to prevent one patient dropping out.