# **VA Cooperative Studies Program Epidemiology Analytics Resource (CSPEAR)**

# Schizophrenia

**November 2018** 

# Fact Sheet: Data on Veterans Using VA Health Care

CSPEAR provides timely epidemiologic information on VA health care users. This fact sheet presents summary data to inform a broad community of VA leaders, investigators, and clinicians as they consider how best to address the needs of Veterans.

**Introduction:** Affecting about 1% of all Americans [1], schizophrenia is a long-term mental illness that interferes with a person's ability to think clearly, manage emotions, make decisions, and relate to others. Schizophrenia can cause considerable social and occupational disability, and Veterans are disproportionately affected. No cure is currently available for this condition, but it can be treated and managed effectively in several ways [2].

# Trends in Prevalence of Schizophrenia, FY 2005 - 2017 PTSD prevalence Median no. of clinic visits 1,400,000 of visits/patient-yr **VHA users with Schizophrenia** 1,200,000 1,000,000 800,000 30 600,000 400,000 Median no. 10 200,000 2005 2007 2009 2011 2013 2015 2017 Fiscal Year

Prevalence of schizophrenia and average number of clinic visits in users of the Veterans Health Administration (VHA). FY = fiscal year. The number of VHA users in FY 2017 was 6,071,059 [3].

### **Fast Facts**

- An estimated 127,445 VHA users (approximately 2.1% of the VHA patient population) with schizophrenia received care in 2017, representing significant health care resource use.
- Schizophrenia affects all races and genders, but the condition is more common among men, and African-Americans are more likely to be diagnosed.
- In Fiscal Year 2019, VHA is supporting more than 15 studies to better understand, and ultimately find new treatments for, schizophrenia.

### **Methods**

**Population:** The population included users of VHA health care in fiscal years (FY) 2005 through 2017. While protecting privacy, a team of researchers and clinicians developed and validated algorithms to identify and characterize patients with a diagnosis of schizophrenia. Criteria for diagnosis included two outpatient visits, or one inpatient hospitalization, based on International Classification of Diseases-Clinical Modification (ICD-CM) codes for schizophrenia: ICD-9-CM 295.x (excluding 295.4x, 295.7x) or V11.0, as well as ICD-10-CM F20.x (excluding F20.81).

**Data Sources:** Data were extracted from the VA Corporate Data Warehouse (CDW), a national database that integrates clinical and administrative information in the VHA; additional data came from specific sources [3, 4].

**Notes:** This work was conducted under the auspices of CSPEAR's operational access to VA data. This material is the result of work supported with resources and the use of facilities at the VA Cooperative Studies Program Epidemiology Center in West Haven, CT. The contents do not represent the views of VA or the US Government.

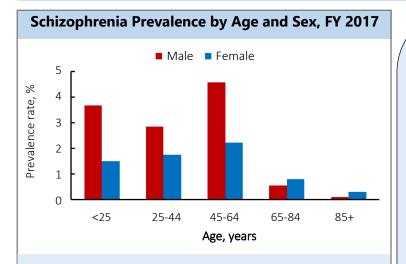
Visit <u>CSPEAR's website</u> or contact <u>CSPEAR@va.gov</u> for more information.

**Suggested citation:** VA Cooperative Studies Program Epidemiology Analytics Resource. Schizophrenia Fact Sheet: Data on Veterans Using VA Health Care. Cooperative Studies Program, Office of Research and Development, Department of Veterans Affairs. 2018.

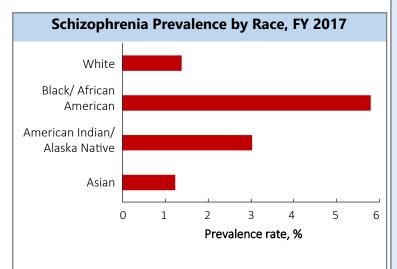




# **CSPEAR Fact Sheet for Schizophrenia** — continued



Men have a higher prevalence of schizophrenia than women up to age 65; the condition is less common among the elderly.



Black/African-American Veterans experience the highest prevalence of schizophrenia ("other" race not shown).

# 18.0% 15.4% 25.2% North Atlantic Southeast

20.8%

Midwest

Continental

Geographic Distribution of Schizophrenia, FY 2017

Among the 127,445 VHA users with schizophrenia, the distribution of cases was fairly consistent across wide

geographic regions.

# **VHA Projects on Schizophrenia**

VHA is supporting more than 15 studies in Fiscal Year 2019 that focus directly on schizophrenia, helping to improve the future quality of life for Veterans with this condition.

# Biomedical Laboratory R&D

• representative project: Dissecting cis regulation of gene expression in schizophrenia.

## Clinical Science R&D

 representative project: Reducing hippocampal hyperactivity and improving cognition in schizophrenia.

# Cooperative Studies Program (CSP) R&D

• representative project: Genetics of functional disability in schizophrenia and bipolar illness (Study CSP#572).

### Health Services R&D

 representative project: Population-based outreach services to reduce homelessness among veterans with serious mental illness.

### Rehabilitation R&D

• representative project: Improving negative symptoms & community engagement in veterans with schizophrenia.

In summary, VHA research is promoting a better understanding of, and ultimately improved treatment options for, schizophrenia.

### **References and Resources**

- [1] Schizophrenia. National Alliance on Mental Illness. Accessed September 2018 at https://www.nami.org/Learn-More/Mental-Health-Conditions/Schizophrenia.
- [2] Schizophrenia. National Institute of Mental Health. Accessed September 2018 at https://www.nimh.nih.gov/health/topics/schizophrenia/index.shtml.
- [3] National Center for Veterans Analysis and Statistics.
  Accessed September 2018 at https://www.va.gov/vetdata/docs/Utilization/.
- [4] VA Utilization Profile FY 2016. Accessed September 2018 at https://www.va.gov/vetdata/docs/Quickfacts/VA\_Utilization\_Profile.pdf.