Objective
The present research is aimed at RCTs with a head-to-head design comparing long-acting injectables of second-generation antipsychotic with the same oral agent, and explores the effects of including patients with dopamine supersensitivity psychosis (DSP) on the outcomes of RCTs. If a significant portion of DSP patients dropped out, this would suggest that the completers of the RCTs included more patients with stable clinical condition and less risk of relapse.

Methods Used
The PI could not handle the relevant datasets provided from the YODA project and another data system since the data form was not familiar to the PI. Despite several advices from the projects, it was too difficult for the PI to handle data.

Results
No data was downloaded or used. No analyses were conducted.

Conclusions
N/A.