N.N. 62 years old female patient diagnosed with schizoaffective psychosis 25 years ago. She was three times on the clinical treatment. Before coming to hospital she was treated with risperidone, clozapine, carbamazepine, fluphenazine, lithium. On admission to hospital she fully developed clinical signs of schizoaffective psychosis with positive and negative signs of psychosis and signs of chronic brain syndrome. During hospitalization she was treated with conventional antipsychotics (haloperidol, promazine), mood stabilizer (carbamazepine), hypnotic (flunitrazepam) and infusions. Despite the treatment, even after a month there has been no improvement. Patient is still completely unsettled, she has hallucinations, is agitated, can not sleep, and had dementia symptoms. Her relatives decided to take her home, on very carefully home treatment and nurture. After two months there are still no signs of improvement of mental health. After that, haloperidol and promazine are replaced with olanzapine (15 mg dose). In the next 2 weeks there are signs of mood stabilization, organization of personality, and generally mental health improvement. Patient is starting to care about herself and her mental health. After three weeks she returned to church, and she has amnesia for the period of treatment and period of three months after hospital treatment. Nowadays she is in a state of stable remission and she is on Olanzapine therapy (10mg per day) and carbamazepine (600mg per day). The treatment of female patients before and during hospitalization has been unsuccessful despite the whole range of different combinations of antipsychotics and mood stabilizers. Olanzapine was not in the treatment because of patient's economic reasons (monthly price was cca 200 €). After the decision of the competent Department of Health medication is placed on the free list of medication and included in the therapy promptly.