**Self-disturbance as predictor for the conversion of ultra high risk patients to a psychotic state**

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**Background:** Self-disturbance is a core marker of psychotic vulnerability. The Structured Interview for Prodromal Syndromes (SIPS) is a widely used measure to determine subjects at ultra high risk (UHR) for developing a psychotic disorder. Could this commonly used UHR research tool also be used to identify self-disturbance?

**Objective:** (1) To assess whether self-disturbance as recorded in patients’ medical files is predictive for conversion of UHR patients to a psychotic state. (2) To explore whether SIPS can be used to assess self-disturbance in the prodromal phase of psychosis.

**Method:** Patients were recruited from the TOPP (early treatment of prespsychosis)-study in Stavanger, Norway. A content analysis was used to retrospectively analyze the medical files of five UHR subjects who had converted to a psychotic state with the medical files of five UHR matched controls. Further, preliminary SIPS items identified as relevant for assessing self-disturbance.

**Results:** Baseline medical files of subjects who converted to psychosis (n = 5) by the 2-year follow-up showed a significant higher degree of self-disturbance than those who did not convert (n = 5). This was not reflected in a significant higher score on baseline SIPS item identified as relevant for assessing self-disturbance.

**Conclusion:** Our results indicate self-disturbance as a vulnerability marker of psychosis. By employing patient files as indicator for external validity, there was no support for the SIPS as a measure of self-disturbance.

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**Story production and social functioning in first episode psychosis:**

**Relationship to verbal learning and fluency**

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**Background:** Communication impairments in schizophrenia including decreased speech output are common,1 with attention and sequencing ability accounting for substantial variance in speech difficulties.2 In addition, social comprehension is a core neurocognitive impairment in schizophrenia3 thus further compromising social functioning. Given consistent findings for impaired verbal learning and fluency in schizophrenia, first episode psychosis (FEP) and ultra high risk (UHR) groups, this study aimed to investigate these verbal functions in relation to story production and social functioning.

**Method:** Three groups of participants: FEP (n = 36), UHR (n = 9), healthy controls (HC, n = 21), completed measures of clinical status, social functioning, a series of neuropsychological tests targeting verbal functioning, and a story production task.

**Results:** Story results showed reduced productivity (words per minute) and self monitoring for FEP compared to HC (P < 0.01). FEP performed significantly poorer than HC on most indices of verbal learning and verbal fluency. Premorbid measures showed significantly poorer academic but not social adjustment since childhood for the FEP group. Story production was positively associated with verbal learning and fluency for the FEP group only (P < 0.05). There was a trend for UHR scores across all domains to fall between the FEP and HC groups.

**Conclusion:** People with FEP show a childhood history of reduced school performance that is associated with skills essential for daily social interactions as evidenced by the findings for story production and verbal learning and fluency.

**References:**

Job-Prescription: a vocational rehabilitation program for people with severe mental illness in South-West Norway
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Background: Unemployment is a major problem amongst people with severe mental illnesses (SMI), even though studies show up to 70% of people with SMI express a wish to work. In January 2007, Stavanger University Hospital and the state employment services established a joint partnership, and started the project ‘Job-Prescription’.

Objectives: The first objective of the project is to help participants find and use vocational opportunities so they may qualify for skilled jobs and develop satisfying careers and wages. The second objective is to determine whether vocational rehabilitation has beneficial effect on symptoms and quality of life.

Method: Patients with severe mental illnesses are included according to consecutive referrals from mental health services. ‘Job facilitators’ set rehabilitation diagnosis based on the Boston rehabilitation method, identifying vocational goals, personal and environmental resources. Individual Placement and Support (IPS) is used for practical guidelines. Outcome measures are Rosenberg Self-Esteem Scale, General Perceived Self-Efficacy Scale and Lehman’s Quality of life Scale.

Results: 140 participants aged 18–35 have been included, 34% of all participants went to competitive work, studies or job placements. Preliminary analyses, N = 24, show no effect of job outplacement in Job Prescription on self-esteem or perceived self-efficacy. However, analyses will be conducted on the remaining participants.

Substance abuse in first-episode psychosis: patients who stop abusing have better 2-year outcome
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Background: Abuse of drugs and alcohol is common in first-episode psychosis and frequently linked to poorer outcome.1 However, these results are mostly based on samples that are small and/or have limited generalizability.

Objective: To study the 1- and 2-year outcome of first-episode non-affective psychosis with emphasis on the predictive power of abuse of drugs and/or alcohol at baseline.

Methods: A follow-up study with a clinical epidemiological sample of first-episode psychosis in patients aged 15–65 recruited from three areas in Scandinavia (two in Norway and one in Denmark). All patients were assessed on abuse of drugs/alcohol, premorbid functioning, social functioning and symptom level at intake and symptomatic and functional outcome after 1–2 years of treatment. All patients were offered a similar treatment package containing antipsychotics, family work and individual psychotherapy.

Results: Drug and alcohol abuse at baseline predicted a greater number of relapses, poorer social functioning on the GAF and less stable employment at both 1-and 2-year follow-up. Approximately 50% stopped abusing drugs at follow-up. Persistent abusers were more often chronically psychotic, had a higher number of relapses and hospital admissions at 1-year follow-up. They comprised a more symptomatic group at 1 year with more positive, cognitive, depressive, and excitement symptoms, as well as lower symptom and functioning GAF scores. At 2 years, a tendency for the same findings was observed.

Conclusions: Persistent abuse a difficult and significant problem in first episode psychosis. Almost 50% in our sample stopped the abuse.

Reference:
Substance misuse and psychosis – associated risks
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Background: Studies have shown a link between substance misuse and development of psychotic disorders.

Objective: Comparing patients with SIP (Substance Induced Psychosis), primary psychosis (PPS) with substance misuse and primary psychosis (PP) without substance misuse at baseline.

Method: The study included 17 SIP patients, 21 PPS patients and 62 PP patients from the TIPS-II study (Rogaland, Norway). All patients gave informed consent and were included between 2006 and 2010. Assessments included symptom levels (PANSS) and global functioning (GAF).

Results: There were no differences in terms of age, sex, or suicidality between the groups. Analysis for social and academic factors showed no difference between groups for premorbid function (PAS). The SIP-group were shown to have a shorter Duration of Untreated Psychosis (DUP) compared to the primary psychosis patients. \( P = 0.05; \text{median: SPI-2.00; PPS-5.00; PP-20.00}. \) SIP patients had higher scores on the excitement component in PANSS \( (P = 0.049) \) and poorer GAF functioning scores compared to PP-patients \( (P = 0.025; \text{Median: SIP-37.00; PPS-37.14; PP-42.44}). \)

Conclusion: Preliminary results indicate that SIP patients have shorter DUP, higher scores on the excitement component in PANSS and lower GAF functioning scores compared to patients without drug abuse.

Teachers’ awareness for psychotic symptoms in secondary school; The effects of an early detection program and information campaign
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Running title: Psychosis awareness in teachers
Key words: psychosis; early intervention; schools

Background: Besides parents, teachers are among the most important actors in the process to get adolescents with mental health problems including psychotic disorders into treatment. In the Norwegian county Rogaland teachers have been targeted in mental health literacy programs aimed at early detection of psychosis.

Objective: To investigate (i) high school teacher’s literacy on psychosis symptoms and (ii) teachers’ confidence in the positive effects of psychosis treatment on the mental health of students with psychotic symptoms at two sites: (i) One site with an extensive early detection of psychosis program including an ongoing information campaign on early signs of psychosis and (ii) the other, a control site with no early detection or information campaign aimed at psychosis.

Results: Teachers at the study site with an ongoing information campaign and access to an outreaching team for early detection and treatment of psychosis demonstrated a higher level of confidence in the effects of treatment on psychosis. At both sites we found that teachers who have participated in mental health literacy training programs do show a better mental health literacy. No significant effect of study site on mental health literacy was found.

Conclusion: Access to a detection and treatment program for psychosis can provide more confidence in the effect of treatment for psychosis in young people. Mental health literacy training programs for teachers seem to have the expected effect: Better mental health literacy, including more knowledge on early signs of psychosis.

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Breakthrough improvement model: moving the hospital early detection services to a municipality youth health- and leisure center. Is it possible detecting mental illnesses earlier?

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**Background:** Results from the TIPS study in Stavanger, conducted in 1997–2000 showed that an early detection team and information campaigns can significantly reduce the Duration of Untreated Psychosis (DUP).

**Objective:** Offer our hospital specialized early detection (ED) services to adolescent/young adults between 15 and 20 years in a municipality health and leisure center for youth. In the city of Stavanger the old police station has been converted to a health and leisure center for the youth. The following services are offered:

- Youth health centre with school nurses and GP’s.
- Social workers working with troubled youth.
- Metropolis which is a music and cultural club.
- K46 which is a low threshold services to young people with drug dependencies.

**Method:** Offer ED presence at the health- and leisure centre on Wednesday’s between 3 p.m. and 5 p.m. Offering potential patients and referral agents mental health disorder screening and psychosis assessment.

**Results:** The ED presence has been operating since medium May 2010. So this is an ongoing study. All the requests will be registered. We’ve since 1997 registered all the requests to the ED team. From this data we have baseline information about the requests from the age group 15–20 years living in Stavanger.

**Conclusion:** The conclusions of the study will be presented in the poster presentation.