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Relationship Between Symptomatic Remission and Social Functioning in Tunisian Patients with Schizophrenia: a Cross-sectional Study

A. Mechri¹, I. El Gharbi¹, A. Mrad¹, L. Gassab¹, L. Gaha¹

¹Psychiatry, Faculty of Medicine Monastir University, Monastir, Tunisia

Introduction: The concept of symptomatic and functional remission represents an important challenge in the care of the mentally ill particularly in patients with schizophrenia. However, the association of symptomatic remission with broader functional outcome was not yet documented in non-developing countries including Tunisia.

Objectives: To evaluate the frequency of symptomatic remission in a sample of Tunisian out-patients with schizophrenic and to explore the relationship between symptomatic remission and social functioning.

Methods: It is a cross-sectional study carried-out on 115 out-patients with chronic schizophrenia (87 males, 28 females, mean age= 37.56 ± 10.2 years). Symptomatic remission was assessed by the eight core items of the positive and negative syndrome scale (PANSS). A score of mild or less on all eight core symptoms constitutes symptomatic remission. This symptom level should be maintained for six months. The social functioning was assessed by the Social and Occupational Functioning Assessment Scale (SOFAS) and the Social Autonomy Scale (SAS).

Results: The symptomatic remission was observed in 50.4% of patients. The mean score of the SOFAS was 48.47 ± 14.44 and the mean score of the SAS was 56.6 ± 16.84. A significant association was showed between the SOFAS score and the symptomatic remission ($P < 0.0001$) and between the SAS score and the symptomatic remission ($P < 0.0001$).

Conclusion: Patients with symptomatic remission showed a significant trend for better social functioning. These results suggest that the concept of remission has important implications for the treatment of patients with chronic schizophrenia.