
SOCIAL FUNCTIONING IMPAIRMENT IN PATIENTS WITH SCHIZOPHRENIA: RELATIONSHIPS WITH COGNITIVE DEFICITS, SOCIAL COGNITION AND NEGATIVE SYMPTOMS

E. Merlotti¹, P. Bucci¹, A. Mucci¹, R. Giugliano¹, T. Campana¹, M. Piacchi¹, S. Galderisi¹

¹Department of Psychiatry, University of Naples SUN, Naples, Italy

Introduction. An impairment of real-life social functioning has widely been reported in patients with schizophrenia, even when clinical remission has been achieved. Negative symptoms, cognitive deficits and impairment of social cognition are the disease-related variables mainly associated to poor functional outcome.

Aims. In the present study the above-mentioned disease-related variables were evaluated in a group of patients with schizophrenia and one of healthy controls (HC) in order to investigate their relative weight in affecting functional outcome.

Methods. To both patients and HC the Quality of Life Scale and the Measurement and Treatment Research to Improve Cognition in Schizophrenia Consensus Cognitive Battery (MATRICS-MCCB) were administered; the factor 'real-life motivation' was extracted by the Quality of Life Scale.

Results. Patients showed, with respect to HC, a deficit of learning abilities and speed of processing, as well as an impairment of the index of social cognition 'Managing emotions'. Multiple regression analysis showed that speed of processing and avolition explained 40% and 9%, respectively, of the variance for 'Common objects and activities', as well as 27% and 8%, respectively, of that of 'Interpersonal relationships'.

Conclusions. Our findings indicate that functional outcome in patients with schizophrenia is influenced by cognitive deficit and by avolition but it is not affected by the impairment of social cognition. However, the complexity of this construct suggest to consider further indices of social cognition before to draw definitive conclusions.

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