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THE FUNCTIONAL RECOVERY SCALE IN SCHIZOPHRENIA (FRSS): RELATIONSHIP TO PANSS

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Schizophrenia is a severe and disabling disorder, which affects multiple functional domains adversely.

Several factors like premorbid functioning and psychopathological symptoms can affect functional outcome. Residual psychopathology after an acute exacerbation has a variable influence, going from a weak correlation to positive symptoms to clear association of negative symptoms with reduced social functioning to widespread influence of cognitive symptoms.

We performed a cross-sectional evaluation in a sample of 296 schizophrenic patients for demographic, functional characteristics (using different scales: Functional Recovery Scale in Schizophrenia (FRSS), Subjective Well-being Scale (SWN-K), Quality of Life Scale (QLS)) and symptomatic (using the Positive and Negative Syndrome Scale (PANSS)). Exploratory multivariate analyses were conducted and a model with "functioning" as a latent variable was proposed and tested. Results: Using the 5 clinical dimensions of the PANSS, negative, cognitive and excitation factors are significant predictors of functioning. The model was constructed with "functioning" defined as a latent variable; indicators are sub-scores on FRSS, SWN-K, QLS and exogenous variables included symptomatology, Duration of Untreated Psychosis and educational level. The negative and cognitive dimensions are highly correlated via the latent variable to the 3 dimensions of functioning evaluated by the FRSS: "daily life", "social functioning" and "treatment" and the QLS sub-scores ("interpersonal", "common object", "instrumental role"). Educational level is significantly linked to functioning but not DUP. The model emphasizes the need for treatment strategies that have an effect on negative and cognitive factors, to improve functioning in schizophrenia.