

CLINICAL AND NEUROPSYCHOLOGICAL PREDICTORS OF GLOBAL FUNCTIONING IN PARANOID SCHIZOPHRENIA

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Introduction: Schizophrenia is a worldwide public health problem that exacts enormous personal and economic costs. Schizophrenic patients often have difficulties to care by themselves and need from family and community support, including invalidity benefits.

Objective and aim: Determine clinical and neuropsychological factors which predict global functioning and incapacity in paranoid schizophrenia.

Methods: 40 paranoid schizophrenic outpatients (DSM-IV TR) were evaluated. Global functioning and incapacity was assessed with the DAS (Disability Assessment Schedule). Sociodemographic and clinical data were collected using a questionnaire including: age, gender, years of education and premorbid IQ (National Adult Reading Test), illness onset and triggers, admissions, adherence (Compliance Rating Scale), pharmacological treatment and drug abuse. In addition, psychopathology was assessed with PANSS, depressive symptoms' with the Beck Inventory, insight with SUMD and cognitive functioning with a wide neuropsychological battery of tests which assessed attention, executive functions, verbal and working memory and social cognition.

T-tests and chi-square analyses were used to explore binary or categorical variables and Pearson correlation coefficient for quantitative scales. A stepwise multiple regression analysis was used to predict DAS.

Results: DAS was correlated to positive ($\chi^2 = .415$; $p = .008$) and negative symptoms' ($\chi^2 = .530$; $p = .000$), insight ($\chi^2 = .519$; $p = .000$) and executive functioning ($\chi^2 = -.335$; $p = .035$). The multiple regression analysis revealed that insight and negative symptoms' predicted disability ($R^2 = .417$).

Conclusions: Psychological and psychosocial interventions that increase insight and improve negative symptoms' should be included in a comprehensive treatment of schizophrenia to prevent disability. Future research on antipsychotics should be addressed to improve negative symptoms'.