

## P03-84 - IMMUNE REACTIVITY AND VARIANTS OF CLINICAL-SOCIAL ADAPTATION IN SCHIZOPHRENIA

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Study of clinical and biological components of adaptation in schizophrenia currently is of relevance.

**Objective:** Identification of interrelationship immunity with clinical-social adaptation of schizophrenic patients.

We examined 107 schizophrenic's (76,1% - patients with paranoid schizophrenia with continuous and episodic type of course, F20.00, F20.01, F20.02).

The psychometric scale PANSS was used to estimate the dynamics of psychopathological symptoms during treatment. The immunological examination included the definition of phenotypes of surface receptors of immunocompetent cells, level of IgM, IgG, IgA. The research was carried out in two points: first - at admission, second - in 6 weeks of treatment.

Four adaptation types have been revealed: integrative (combining high clinical and social indices, 40,1% of patients); introvert (high clinical and low social indices, 38,3%); extrovert (low clinical and high social indices, 11,2%); destructive (combining low clinical and social indices (10,4%).

It has been shown that patients with extrovert and destructive adaptation types characterizing by great severity of psychopathological symptoms (high score) according to PANSS.

At 1<sup>st</sup> point T-immunodeficiency was diagnosed among the schizophrenic patients, which was kept within 6 weeks of treatment. In the therapy course peculiarities of psychoneuroimmunomodulation have been revealed: relatively favorable in immunological aspect are integrative and introvert types of adaptation. In integrative type number of immunocompetent cells does not change and has trend toward normalization. In destructive type greater suppression of T-immunity has been revealed (CD2<sup>+</sup>-, CD3<sup>+</sup>-, and CD4 +-lymphocytes decrease); HLADR<sup>+</sup>-lymphocytes remain high.

Thus, clinical-social differences between groups have been confirmed by data according to immune reactivity.