EARLY WARNING SYMPTOMS OF SCHIZOPHRENIA

Albanese C.¹, Caterini C.¹, Roggi M.¹, Gallo G.¹, Bolognesi S.², Goracci A.², Fagiolini A.²

1 Division of Psychiatry, Department of Molecular Medicine, University of Siena School of Medicine, Siena, Italy.
2 Department of Mental Health, University of Siena Medical Center (AOUS), Siena, Italy.

Purpose of the study
The onset of schizophrenia may be preceded by isolated symptoms, behavioral or psychological abnormalities, including disturbances in perception, cognition, communication, interest and motivation. The identification of these symptoms and signs may allow researchers an opportunity for early recognition of those individuals who will develop schizophrenia, thus providing a unique opportunity for early treatment. This study was designed to retrospectively evaluate the presence/absence of isolated or sub-syndromal symptoms before the onset of schizophrenia.

Materials and methods
One-hundred-thirty patients with a diagnosis of Schizophrenia, confirmed by the MINI-Plus (Mini International Neuropsychiatric Interview), were recruited at the University of Siena Department of Mental Health. Clinical and socio-demographic characteristics were recorded and all patients completed a modified version of the psychotic spectrum lifetime version – self report instrument (PSY-SR-Lifetime)[1]. The questionnaire consists of 164 items divided in 5 domains and 18 subdomains that investigate sub-syndromal symptoms of the following areas: hypertrophic self-esteem, strict thinking, superstition, fanaticism, relations with others, self-reference, interpretative attitude, suspiciousness, anger/over reactivity, hyper vigilance (Interpersonal Sensitivity and Paranoid Domains), schizoid-autism and schizotypy (Schizoid Domain), illusions, depersonalization/derealization (Misperceptions Domain) and hallucinations, delusions, catatonia (Typical symptoms Domains). The instrument was modified by adding a investigating how old the patient was when s/he experienced the endorsed symptom for the first time in their life.

Results
Forty percent of the study subjects were women (Fig.1). Mean age of entire sample was 43.76 years old. Mean age at the first time that patients have become aware of being sick was 21.99 years old and the age of diagnosis corresponded to 26.99 years old; at least there were 4.97 years between the age of the appearance of the first disease and the age of full-blown clinical diagnosis (Fig.2).

Many symptoms were present several years before the onset of the full-blown diagnosis. The subdomains related to interpersonal sensitivity, strict thinking, superstition, fanaticism and schizoid-autism were among those that were endorsed earlier. For instance, the items in the fanaticism subdomain were endorsed many years before the patients met the criteria for a full-blown diagnosis, particularly in female subjects, where the symptoms presented 7 years earlier than males. Symptoms belonging to the subdomain related to hallucinations, delusions or catatonia were instead observed for the first time at a time that was closer to the time of diagnosis.

Conclusion
Our study suggests that a number of schizophrenia symptoms may be present several years before the time of the full-blown diagnosis. Larger and prospective studies are needed to better evaluate which and how frequently isolated or sub-threshold symptoms are present before a diagnosis of schizophrenia, to establish their predictive value, especially in terms of which prospectively identified symptoms or conditions may be more associated with a high rate of conversion to schizophrenia or another psychotic disorders [2] and to establish if early interventions may improve the course of illness [3].

References:

