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TREATING PRODROMAL PSYCHOSIS IN SLOVENIA

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This presentation describes an ongoing program in Ljubljana.

The program originated with one psychiatrist [MB] who began to offer treatment with antipsychotics- typicals with the earliest patients, and later atypicals, in particular olanzapine, in very low doses [e.g.2.5 mg olanzapine], often combined with group psychotherapy, in patients considered to be at the initial [prodromal or 'at risk mental state'] phase of developing a psychotic illness. Often, where indicated, antidepressants and occasionally anxiolytics were also added to the treatment. Thus this program differed substantially from other well known studies of treatment in the prodrome [e.g. Melbourne and Yale], and developed independently of them.

It has been shown by repeated clinical evaluation of the patients that these patients were indeed originally in the prodromal phase of psychotic illness.

Many patients have now been followed over several years as they developed into full first episodes of psychosis and for some years later.

The presentation will describe the process of how the patients were treated, and how their illness developed.

The presentation will describe results, of a study comparing outcomes of treatment in the prodrome by this method, with treatment of patients who presented with psychotic illness in the usual way, with long DUP. This shows long term advantages in terms of severity of symptoms, reduced relapse and readmission rates, better employment results, and improved relationships among the patients treated in the prodrome.