

S25-02 - PREVENTIVE AND INTENSIVE TREATMENT OF PSYCHOSIS FOR HIGH-RISK AND FIRST-EPIISODE SUBJECTS

M. Nordentoft, A. Thorup, P. Jeppesen, D. Nordholm, M. Bertelsen, L. Petersen

Psychiatric Center Copenhagen, Copenhagen University, Copenhagen, Denmark

Introduction: It is unknown if the positive effects of intensive early intervention programmes are sustainable over time. Duration of untreated psychosis (DUP) is associated with outcome of schizophrenia, and it has been proved that DUP can be shortened. Randomized clinical trials have tested possibilities for interventions in high risk groups.

Methods: We conducted a single-blinded randomized controlled trial of two years of specialized assertive early intervention programme (OPUS) versus standard treatment. A total of 547 first-episode patients with first episode psychosis or schizotypal disorder were included in the trial and reinterviewed after one, two and five years. OPUS treatment consisted of ACT with family involvement and social skills training.

Results: At five-year follow-up, the positive effect on psychotic and negative symptoms of the treatment seen after two years had disappeared. A significantly smaller percentage of patients from the experimental group were living in supported housing and were hospitalized fewer days during the five-year period. Among patients with schizotypal disorder, the proportion who had a transition to psychosis after one year was 8.1 vs. 28.0 percent for patients randomized to OPUS vs. standard treatment, respectively. At two-year follow-up the figures were 28.1 vs. 44.0. Duration of untreated psychosis (DUP) median was 48 weeks. Longer DUP was independently associated with more psychotic symptoms at entry and at one-year and two-year follow-up.

Discussion: Due to previous findings, we have started a new trial in which we will randomize 400 patients to two years versus five years of specialized assertive treatment.