Q Does duration of untreated psychosis affect outcome for people with first episode psychosis?

CONCLUSIONS

Longer duration of untreated psychosis is associated with worse symptoms and functioning, and less chance of remission in people with first episode psychosis.

HISTORICALLY THE PROGNOSIS OF SCHIZOPHRENIA HAS BEEN ATTRIBUTED TO THE UNALTERABLE INFLUENCE OF GENETICS AND ENVIRONMENT ON EARLY BRAIN DEVELOPMENT.1 Antipsychotic treatment is proposed to address symptoms but not to alter the clinical course.2 Over a decade’s worth of longitudinal first episode schizophrenia cohort studies challenge this clinical pessimism, and “doomed from the womb” has been replaced with a belief that earlier treatment with antipsychotics may alter outcomes. Numerous specialty programmes now provide early identification and treatment services, although the controversy regarding the benefits of early intervention remains.

The meta-analysis by Marshall et al found a consistent but modest relationship between longer duration of untreated psychosis (DUP) and worse symptomatic and functional outcomes at 6–24 month follow up, but no relationship with baseline status. The relationship between DUP and outcome was not explained by treatment delays for individuals with a poor prognostic illness as indicated by poor premorbid adjustment. Another recent meta-analysis that evaluated DUP and clinical and functional outcomes using a somewhat different meta-analytic strategy came to very similar conclusions, except finding that longer DUP was associated with more severe negative symptoms at baseline.3

The mechanism by which early intervention may impact prognosis is not known, although these findings lend further support to the notion that psychosis is symptomatic of a potentially treatable neurodegenerative process. Thus, in addition to alleviating the obvious adverse impact of emerging psychosis on normal psychosocial and vocational development, early intervention may also impact the underlying disease process. While acknowledging the need for further research, this study lends strong support to the development of early intervention programmes.

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1 Weinberger DR, McClure RK. Neurotoxicity, neureplasticity, and magnetic resonance imaging morphometry: what is happening in the schizophrenic brain? Arch Gen Psychiatry 2002;59:553–8.