NEUROPSYCHOLOGICAL PERFORMANCE AND DISABILITY IN AMBULATORY PATIENTS WITH SCHIZOPHRENIA

J. Bobes García1, P. García-Portilla1, C. Morralla2, M. De Gracià3, D. Badenes4, G. Escartín5

1Medicine Department, Psychiatry Area, University of Oviedo, Oviedo. 2Sant Pau Avanços, Medical Department, Barcelona. 3Department of Psychology, Balearic Psychological Research Institute, University of Granada, Granada. 4Neurology Department, Hospital Mutua de Terrassa, Terrassa. 5Servei de Salut Mental, Sant Joan de Déu, Barcelona.

On behalf of the EPICOG Study Group

Contact: bobes@us.es

BACKGROUND
Few papers approach the prevalence of cognitive dysfunction among patients with schizophrenia. This data would provide useful information for clinical practice.

OBJECTIVE
Our objective is to estimate the prevalence of cognitive dysfunction in a sample of ambulatory patients with schizophrenia.

METHODS
Transversal study of a sample of outpatients during a routine follow-up visit in mental health centers. The selection criteria included a diagnosis of schizophrenia according DSM-IV-TR and maintenance treatment with second- and third-generation antipsychotics, for at least 6 months. Information about functional and clinical status was recorded, and degrees of disability by means of WHO-DAS II score on four domains. Cognitive assessment included domains related to functional outcome variables according to the MATRICS review, i.e. Working Memory, Executive Function, Verbal Logical Memory and Speed of Information Processing. The experimental EPICOG battery consisted of 4 broadly used cognitive subtests.

RESULTS
The sample consisted of 672 patients included at 252 centres, very few had a cognitive assessment in the past. Executive Function and Speed of Processing Information was the most prevalent affected domain, this last with a 38% of the patients showing performance less than 1.5 standard deviations (SD) from the mean and with a 95% CI of 38.4 – 38.5%. Disability on Verbal Memory was at 25.2%, 95 CI 25.1 – 25.2% and on Working Memory test was of 21.1% 95 CI 21.1 – 21.2. Only preliminary normative data was available for Executive Function test (i.e. semantic fluency). The majority of the patients showed disability in one or two out of four domains (a 71.6%).

Cognitive performance showed significant relationships with patient’s functional disabilities. These domains more related to general disability were Working Memory and Executive Function. The EPICOG experimental battery could discriminate between patient’s according to their employment status: patients currently employed showed a better cognitive performance in all domains.

CONCLUSION
Cognitive dysfunction in schizophrenia follows a heterogeneous pattern. Its assessment and objective methods is important for drug monitoring and for advising on functional aspects. Working Memory (Digit-Number Sequence) and Executive Functions (Semantic Fluency) are shown as the most predictive cognitive variables on patients’ general disability. The proposed EPICOG experimental battery was sensitive to the patient’s employment status.

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