
IS THE PRODROME OF PSYCHOTIC ILLNESS IN FACT A PLURIPOTENTIAL RISK SYNDROME FROM A PHENOMINOLOGICAL POINT OF VIEW?

M. Agius¹, D. Hanafy², R. Zaman¹

¹Psychiatry, University of Cambridge, Cambridge, United Kingdom ; ²Clinical School, University of Newcastle, Newcastle, United Kingdom

Background;

Johannessen & McGorry, have described patients who are seen to be at an ultra-high risk of psychosis as having a 'Pluripotent risk syndrome'. This less specific prodrome reflects the unpredictable nature of 'Ultra-High Risk' states which have been shown to be more likely to develop into a non-psychotic mood disorder than schizophrenia.

Aims

We aimed to assess whether the concept of pluripotent risk syndrome is valid phenomenologically,.

Method

An Audit has been carried out of the patients who have been assessed using the CAARMS tool in order to assess patients who have been judged to have a prodromal psychotic syndrome .

Ten adult patients (6 males & 4 females, aged 19-26 years old) who had been given four broad psychiatric diagnoses for coding, but who were thought to have prodromal psychotic illness (Depression, Schizoaffective disorder, Borderline personality disorder and psychotic illness) were chosen from an anonymised database of the patients and their symptomatology as assessed by CAARMS was retrospectively assessed to see if the presence of depressive symptoms supported the case for a 'Pluripotent risk syndrome'.

Results

Though patients diagnosed with depression frequently exhibited depressive symptoms, psychotic symptoms were also apparent, albeit in comparatively decreased severity. Patients diagnosed with schizoaffective disorder had depressive symptoms more frequently than psychotic symptoms, but these were comparatively less severe. Borderline personality disorder patients exhibited depressive symptoms more frequently than psychotic symptoms .Psychotic illnesses frequently had depressive symptoms, but more typically (and unsurprisingly) had comparatively more severe psychotic than depressive symptoms.

Discussion.

The reason that patients were coded according to ICD 10 criteria is because this is obligatory for all patients in community teams for report to central government in the UK. They were all however suspected to be prodromally psychotic. All of these 'at ultra high risk mental state' patients exhibited both some psychotic symptoms and also depressive symptoms.

Conclusion

Since all patients had both attenuated psychotic symptoms and depression symptoms, we conclude that the concept of a 'Pluripotent risk syndrome' is in our view born out.