

Early Intervention for Psychosis

Dr. May Lam
Assistant Professor,
Department of Psychiatry,
The University of Hong Kong

- Psychosis
- Psychosis–substance use
- Bipolar Affective Disorder
- Programmes
 - EASY
 - JCEP
 - EPISO
- Prodrome

What is psychosis?

- a mental state in which the individual experiences a distortion or loss of contact with reality, without clouding of consciousness
- Positive symptoms
- Negative symptoms

Positive symptoms

- Hallucinations
- Delusions
- Thought disorder

Negative symptoms

- Blunted affect
- Loss of motivation
- Neglect of self care
- Social withdrawal
- Poverty of speech

Secondary symptoms

- Insomnia/hypersomnia
- Agitation
- A variety of behavioural change
- Impaired role functioning

Facts on psychosis

- ▶ 5% of general population experiences a psychotic episode at some time in their life
- ▶ Onset usually around *adolescence* and *early adulthood*
- ▶ 80% psychosis onset between the age of 16 to 30
- ▶ Children as young as 7 to 8 can develop psychosis, though rare

Psychosis = schizophrenia?

- ▶ Psychosis is only a cluster of symptoms which may be caused by different disorders.

Psychosis

Includes:

- ▶ *Schizophrenia*
- ▶ *Bipolar affective disorder*
- ▶ Delusional disorder
- ▶ Schizoaffective disorder
- ▶ Psychotic depression
- ▶ *drug-induced psychosis*
- ▶ e.g. amphetamine, MDMA (ecstasy), cocaine

Organic Causes of psychosis

Rare organic causes:

- ▶ Temporal lobe epilepsy,
- ▶ Wilson's disease,
- ▶ Huntington's chorea,
- ▶ Encephalitis,
- ▶ AIDS

Affective disorders

- ▶ Unipolar Affective Disorder
 - ▶ Bipolar Affective Disorder
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- Manic Depressive Disorder

Bipolar Affective Disorder

- Unipolar ≥ 3 episode of depression
- ▶ Bipolar ≥ 1 episode of depression & of mania, or multiple mania
 - Bipolar I: major depressive and manic episodes, or manic episodes alone
 - Bipolar II: major depressive episodes, manic/hypomania episodes only attribute to treatment
- ▶ Bipolar patients are more likely to have earlier and more acute onset, familiar inheritance
- ▶ Lifetime prevalence 5.8% for depression, 0.012% for bipolar multifactorial

Clinical Features Major Depressive Illness

- ▶ Mood
 - Depressed, diurnal variation
 - Loss of reactivity, pervasive
- ▶ Speech & Cognition
 - Deceased tempo, reduction in quantity
 - Guilt, self blame, worthlessness, hypochondriasis
 - Suicidal, morbid, paranoid
- ▶ Behavioural
 - Poor appetite, weight change
 - Insomnia or hypersomnia
 - Psychomotor retardation/ agitation, loss of energy, fatigue, decreased libido, anhedonia

Clinical Features Hypomanic & Manic states

- ▶ Mood
 - Elevation, irritability,
- ▶ Speech & Cognition
 - Pressure of speech, increased tempo of thinking, flight of ideas
 - Distractability
 - Inflated self image (grandiose, expansive)
- ▶ Behavioural
 - Increased drive and activity
 - Risk taking behaviour
 - Insomnia
 - Appetite good, weight loss

- ▶ When psychotic symptoms occur for the first time, they are collectively called the psychotic disorders, as research has shown that it may be *difficult to distinguish* the types of psychotic disorders e.g. bipolar disorder vs. schizophrenia at an early stage and diagnosis only become stabilized after a few years.

Why is early intervention important?

- ▶ Prolonged Duration of Untreated Psychosis (DUP):
 1. Adult psychotic patients with a delay of 1–2 years (mean 480 days) before their first contact with psychiatric services (Chen et al 1999).
 2. Local study of adolescent psychotic patients (aged under 18) – **20%** remained untreated and actively psychotic for **over 1 year**

Why care about early intervention? (cont'd)

Problems with Prolonged DUP:

1. Untreated psychosis may be neurotoxic: Less responsive to anti-psychotic medication. Evidence of poorer long term outcome.
2. Secondary complications often incurred Occupational, Social and family costs and risks, psychosocial developmental delay/arrest, particularly in children and adolescents.

Who is affected?

- ▶ Stress–vulnerability model
Biological predisposition (genetic/neurodevelopmental)
+ stressors (psychosocial/physical)
- ▶ **Caution:** many people who develop a psychotic illness do not have a family history of psychosis, or any of the features!

Treatment

Mainstay of treatment:

- Antipsychotic medication.
- “Start low, go slow” principle.
- Use lowest possible dose to control symptoms.
- Awareness and prompt management of side effects.

Psychosocial Intervention

- Psychoeducation.
- Psychological Intervention Programmes for Early psychosis (PIPE)
- Family intervention.
- Group therapies – for both individual patients and families.
- Cognitive-behavioural therapy for persistent psychotic symptoms
- Supportive counseling
- Social skills training
- Rehabilitation programme (NGOs)

Collaboration

- Liaison and collaboration with family, school, social worker.
- Aim to optimize patients recovery potential and minimize obstacles

Programmes

- EASY
- JCEP
- EPISO

E.A.S.Y. Early Assessment Service for Young people with psychosis

HA EASY Service

- Started in 2001
- Public Awareness, rapid assessment, phase specific intervention
- Case management
- 15–25 years, for first 2 years of illness
- Territory wide service
- >1000 assessment, >600 cases pa

Aim

Detect and treat adolescent psychosis in young people early so as to:

- ▶ Reduce **secondary complications**.
- ▶ Enhance and hasten recovery so that **suffering** associated with untreated psychosis is minimised.
- ▶ Reduce **disruption** to developmental trajectories such as school work and development of self identity and peer relationships.

Components of the programme

- ▶ **Education of front-line professionals** (primary care physicians, teachers, school social workers) to increase awareness of the disorder.
- ▶ **Open referral** system with prompt response.
- ▶ **Quick response** from clinic.
- ▶ **Multi-disciplinary** assessment & treatment.
- ▶ Optimal multi-disciplinary management including medication, psychoeducation, rehabilitation with a case manager.

E.A.S.Y.

- ▶ Hotline: 29-283-283
- ▶ Website: www.ha.org.hk/easy



賽馬會思覺健康計劃
JOCKEY CLUB
EARLY PSYCHOSIS
PROJECT



資助機構
Supported by
香港賽馬會慈善信託基金
The Hong Kong Jockey Club Charities Trust



主辦機構
Project led by
香港大學
THE UNIVERSITY OF HONG KONG



醫院管理局
HOSPITAL
AUTHORITY



教育及社會工作服務處
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賽馬會思覺健康計劃
Jockey Club Early Psychosis Intervention Society

About EPISO

- ▶ Founded in 2007
- ▶ Registered as a charitable institution in 2009.
- ▶ Consists of experienced professionals and academics in the field of early psychosis.



Hong Kong
Early Psychosis Intervention Society
香港思覺失調學會

Missions

- ▶ Foster destigmatization of psychosis and related disorders by providing educational and mental health promotional activities.
- ▶ Promote channels for timely help-seeking and early diagnosis of psychosis and related disorders.
- ▶ Facilitate the translation of scientific and clinical knowledge into educational information and effective intervention practices.
- ▶ Provide training and consultation services to allow clinical and research findings to inform relevant professional workers in Hong Kong.



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Prepsychotic Prodrome

- ▶ A period of behavioural or functional change prior to the onset of obvious psychotic symptoms.
- ▶ Mostly defined retrospectively.
- ▶ An "at risk mental state".
- ▶ Not all people with "prodromal symptoms" necessarily develop into psychosis.

- ▶ The identification of individuals at high risk of developing psychosis creates opportunities for early intervention prior to the onset of psychosis to prevent or minimize later ill health
- ▶ A more modest possibility from such prospective studies is that close follow up monitoring of identified vulnerable individuals could minimise the duration of untreated psychosis, hence improving the treatment outcome

思覺失調發病率

