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PREDICTORS OF PERSISTENCE OF ULTRAHIGH RISK SYMPTOMS AND PREDICTORS OF TRANSITION INTO PSYCHOSIS

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Aims: To determine predictors of transition from ultrahigh risk into psychosis.

Method: The Dutch EDIE trial has included 201 people with an ultrahigh risk for psychosis. These were included with both a referral based strategy and a screening all help-seeking people strategy. The study had a 24 month inclusion period and an 18 month follow-up period with each patient. The preliminary results are presented.

Results: A logistic regression was performed over 164 cases. 29 patients developed a psychosis.

Predictor variables were depression, social interaction anxiety, positive symptoms on the CAARMS, negative symptoms on the CAARMS, quality of life, social functioning, genetic risk, and the personal beliefs about illness.

The backward logistic regression (likelihood ratio) discarded four variables. Predictors of psychosis were depression, positive symptoms, genetic liability and beliefs about illness at baseline.

Conclusions: People with high scores on depression and positive symptoms are likely to develop a psychosis. Also those who have a psychotic parent and positive symptoms are more likely to make a transition. Interestingly people that consider their condition as hopeless, feel entrapped by their condition, excluded by other people and not in control of symptoms also have a heightened chance for developing psychosis in this sample.