There was strong negative correlation beetween prolactin levels and lengh of treatment in a group of patients treated with risperidone (r=-0.42) (p<0.05). Prolactin level was decreasing with longer treatment.

Conclusions:

1. Hyperprolactinaemia occurs with nearly same prevalence in patients treated with risperidone and olanzapine.
2. Hyperprolactinemia affects more younger people trated with olanzapine.
3. Level of prolactin decreases with longer treatment with risperidone, but not with olanzapine.

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Subjective attitude towards antipsychotics and neurocognitive functions in schizophrenic inpatients

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Objective: This study aimed to examine the relationships between subjective attitudes towards antipsychotics and objective cognitive function in schizophrenia patients.

Method: The subjects of study were clinically stable schizophrenic patients (N=55) who were hospitalized in Naju National Hospital. They were grouped into positive (N=35) and negative drug attitude groups (N=20) by Drug Attitude Inventory (DAI-10). They were assessed using Positive and Negative Syndrome Scale, Calgary Depression Scale for Schizophrenia, Extrapyramial Symptom Rating Scale, UKU side effect rating scale, Social and Occupational Functioning Assessment Scale and Subjective Well-being Under Neuroleptic Treatment. A battery of neurocognitive tests were also administered using Seoul Computerized Neurocognitive Function Test.

Results: Patients between positive and negative drug attitudes did not differ in social demographic and clinical characteristics. They also showed no differences in neurocognition tests except a subset of verbal auditory learning test.

Conclusions: These findings may indicate no associations between subjective drug attitudes and objective neurocognitive dysfunctions in schizophrenic inpatients. It suggests that subjective aspects measured by DAI may be a distinct dimension from objective neurocognitive profiles in terms of compliance.

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Neuropsychological functioning in early-onset first-episode psychosis: lack of differences among diagnostic subgroups

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Cognitive impairment has been consistently described in adult-onset psychosis. A few studies have reported that cognitive impairment is present in early-onset schizophrenia. However, studies on other psychoses are lacking and little is known about the potential specificity of cognitive impairment patterns among the differential sub-diagnoses.

Aims: 1) To examine the nature and extent of cognitive impairment in first-episode early-onset psychosis (EOP) and 2) To search for differential cognitive impairment profiles among the diagnosis subgroups.

Methods: This study describes the basal neuropsychological results of the child and adolescent first-episode psychosis study (CAFEPS), a spanish multicenter longitudinal study. One hundred first-episode patients with EOP and 98 healthy controls underwent a comprehensive neuropsychological assessment. Three diagnostic categories were established: schizophrenia spectrum disorders (n=45), affective psychosis (n=28), and psychosis not otherwise specified (n=28). Baseline diagnoses were confirmed at a 6-month follow-up visit.

Results: Performance of patients was between 0.88 and 2 standard deviations below that of controls in all cognitive domains: attention (p<0.001), working memory (p<0.001), executive functioning (p<0.001), and memory (p<0.001). The three diagnostic subgroups did not differ from one another in terms of impaired/preserved cognitive functions and degree of impairment.

Conclusions: The pattern and degree of cognitive impairment in first-episode EOP patients is similar to that reported in first-episode adult-onset patients. Our results failed to identify significant differences among diagnostic subgroups at the onset of the illness. The longitudinal design of the present study will allow for identification of potential differences in the course of cognitive impairment.

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Cognitive functioning in schizophrenic patients and their siblings

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Background: Recent years have seen a particular attention towards the research of particularities of cognitive processes in schizophrenia.

Objectives: This study aims to investigate neuropsychological impairment in schizophrenia patients and their siblings.

Method: Cognitive functioning in 30 schizophrenia patients, 30 unaffected siblings and 30 unrelated healthy controls was assessed using verbal fluency tests (letters and categories) and several computerized memory and executive function tests.

Results: The patients performed significantly poorer than controls on all cognitive tests. Unaffected siblings demonstrated better performance than patients on some measures of spatial memory and executive function, but the performance was worse then controls. Patients and siblings demonstrated impaired verbal fluency performance.

Conclusions: Patients with schizophrenia and theirs unaffected siblings shared a deficit in verbal fluency.

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Use of antipsychotic drugs in lithuanian clinical practice

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