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Relationship Between Aberrant Salience, Psychotic Symptoms and Pharmacological Treatment in a Follow-up Study: is the Salience a Lifetime Trait?

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Introduction: Aberrant salience is the incorrect assignment of salience, significance or value to different innocuous stimuli. It seems closely related with dysregulation of the dopamine system that in turn relates with proneness to develop psychosis.
Objectives: To evaluate aberrant salience processing in a clinical trans-diagnostic sample, its relationship with anamnestic psychotic symptoms and current psychopathology, and possible variations of aberrant salience after three months of clinical-based treatment.

Methods: Twenty inpatient subjects attending the Psychiatric Unit (Florence University) were recruited: 3 with Major Depression Disease, 6 with Schizophrenia, 3 with Bipolar Disorder, 4 with Obsessive-Compulsive Disorder, 4 with Eating Disorders. Patients were assessed by means of a clinical interview (SCID-I/P) and several questionnaires (AMDP, MADRS, HAM-A, MRS, PANSS and Aberrant Salience Inventory-ASI) at enrolment (T0) and after an individual and clinical-based treatment lasting 3 months (T1).

Results: At T0 subjects with positive ASI (cut-off>14) reported more frequently past and lifetime psychotic symptoms ($p<0.05$) and constituted a distinct cluster from patients with ASI score < 14. A positive anamnesis of psychotic symptoms was significantly correlated with AMDP susbscales (delusions and perception disturbances), PANSS pos, PANSS neg, PANSS tot scores ($p<0.05$). A significant reduction of mean MADRS, PANSS tot and HAM scores between T0 and T1 was found ($p<0.05$). No differencesin ASI scores between T0 and T1 were observed.

Conclusion: Aberrant salience is significatively associated to lifetime psychotic symptoms. It represents a relevant psychopathologic dimension that, unlike other symptoms, seems not to significatively modify after pharmacological treatment and could represent a stable lifetime.

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