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FIRST PSYCHOTIC EPISODE AND EARLY INTERVENTION: AN OPPORTUNITY TO CHANGE THE COURSE OF THE ILLNESS

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Aims: Early intervention in psychosis constitutes an important opportunity to change the classic limited outcome associated with the patients who suffer of psychotic disease.

Methods: Based on literature review the authors analyse the evidence for early intervention in first psychotic episode.

Results: The evidence for the effectiveness of interventions in early psychosis can be considered in two stages:

1. first stage before the onset of full symptoms of psychosis, in people with high risk of developing psychosis or in the prodrome phase of the illness;
2. second stage includes the therapeutic focus on the period after the first psychotic episode, reducing the duration of untreated psychosis (DUP) and ameliorate the recovery.

Preventing psychosis by intervene in the prodrome or in people with high risk of developing psychosis remains ethically contentious because of the non-specificity of the symptoms. By the contrary there is evidence that early and specialised intervention in first psychotic episode improves outcome. Besides the controversy of the relation between long DUP and poor outcome, there is agreement that clinicians should identify and treat psychosis early with a great impact in patients and their family's life. Effective care during first psychotic episode includes proactive engagement and initiation of low doses of antipsychotics and psychosocial treatments, aiming for maximal symptomatic and functional recovery and the prevention of relapse.

Conclusion: There is evidence that early intervention in first psychotic episode improve clinical effectiveness over standard care. Further studies are important to make evidence more robust.