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Examining the effect of family-based intervention programs used in psychosis on the disease: a systematic review

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Introduction: Psychosis is a complex mental health condition that can have a significant impact on individuals and their families. Family-based intervention programs have been developed to provide support and education to both individuals with psychosis and their families. These programs aim to improve clinical and family outcomes, reduce relapse rates, and enhance the overall well-being of individuals and their families. This study examined the effect of family-based intervention programs used in psychosis on the disease by synthesizing evidence from a systematic review of relevant studies. Family interventions have shown promising results in improving clinical and family outcomes in long-standing psychosis (Sadath et al., 2015). These interventions focus on improving relationships through problem-solving and enhancing the understanding of the illness and its treatment (Kuipers et al., 2010).

Objectives: The aim of this study was to evaluate the effect of intervention programs implemented for the families of individuals diagnosed with psychosis on the course of the disease.

Methods: The study was conducted between August and September 2023 in 3 databases (PubMed, Cochrane Library, Science Direct) using the keywords “psychosis”, “family interventions”, “family in psychosis”. These databases were preferred because they contain a significant amount of evidence-based literature in the field of biomedical sciences and psychology. Studies conducted between 2013 and 2023, whose full texts were accessed and written in Turkish and English were included in the study.

Results: As of September 2023, 16 national and international research articles on the subject have been reached and the literature review continues. When the literature review is finalized, all study results will be presented together.

Conclusions: This review provides an overview of the effects of intervention programs implemented for the families of individuals diagnosed with psychosis on the course of the disease and solution suggestions. Family-based intervention programs have shown promise in improving clinical and family outcomes in psychosis. These programs focus on enhancing relationships, providing education, and reducing relapse rates. However, the implementation of family interventions in routine clinical services can be challenging due to various barriers. Peer support programs have emerged as a valuable addition to family interventions, providing a supportive environment for families to share their experiences and support one another. Future research should focus on addressing barriers to implementation and further exploring the benefits of peer-driven family support services in early intervention programs for psychosis.

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Evaluating the relationship between blood lipids, cardiac risk index, and suicidal behaviors in first-episode psychosis

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Introduction: Schizophrenia patients have demonstrated a high prevalence of suicidal behavior. There isn't yet a definitive explanation of the neurobiological mechanisms of suicidal behavior (SB) in psychotic patients. While subthreshold indices of dyslipidemia were observed in schizophrenia patients, it has shown that there is a relationship between dyslipidemia and suicidal behavior.

Objectives: The study aimed to investigate possible associations between SB and lipid profile including cardiovascular biomarkers in first-episode psychosis (FEP) as compared with healthy controls (HC).

Methods: The study sample consisted of 173 subjects (111 male, 62 female). The sample included 31 drug-naïve FEP patients with current SB (FEP+S), 66 drug-naïve FEP patients without SB (FEP-S), and 76 mentally and medically HC subjects. Blood samples were collected from all participants to determine total cholesterol (TC), low- and high-density lipoproteins (LDL and HDL), and triglycerides (TG). Castelli Risk Index-I, Castelli Risk Index-II, and atherogenic index were calculated. Symptoms were assessed by using the Positive and Negative Syndrome Scale. Nonparametric Kruskal-Wallis and Mann-Whitney tests were used for pairwise comparisons of account of lipid parameters in three groups. A binomial logistic regression analysis was performed to examine the predictive power of lipid profile in the presence of SB in FEP.

Results: The results of Kruskal-Wallis test revealed that a statistical difference was found in TC and TG between groups. Despite statistical significance was observed in TG between all patient groups (FEP+S and FEP-S) and controls, as well as in TC between FEP-S and controls, there was no significant difference between FEP-S and FEP+S for any lipid parameters or cardiovascular biomarkers. No significant correlation was identified between lipid profile and symptom severity. No significant relationships were able to predict the presence of SB in FEP.

Conclusions: In this study, plasma levels of lipid parameters and biomarkers of cardiovascular risk in all patient groups (FEP+S and FEP-S) and HC were compared. Current results show no linkage between SB and lipid profile, but significantly lower levels of cholesterol in FEP. Therefore, cholesterol might have a protective role in terms of psychosis while CII, CI2, and AI were not increased in psychosis. Thus, increased cholesterol levels or cardiovascular risk in schizophrenia patients, that several studies found, may ensue after antipsychotic use. Overall, present findings suggest that lipid profile abnormalities are specifically associated with FEP rather than SB. Controversy of results may reveal that research on SB requires an understanding of whether the patient had concomitant psychosis.

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