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STRUCTURAL NEUROIMAGING IN FIRST-EPIISODE PSYCHOSIS: A REVIEW OF
NEUROIMAGING PRACTICE IN AN EARLY INTERVENTION SERVICE

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Introduction: The UK NICE technology guidance "Structural Neuroimaging in First-Episode Psychosis" concludes that CT/MRI is not routinely recommended as an initial investigation for first-episode psychosis.

Objectives: To evaluate the use of CT/MRI in a group of Early Intervention Service (EIS) patients with a first-episode psychosis aged 18-35 years at presentation .

Aims: To develop practice guidelines for use of neuroimaging in first-episode psychosis.

Methods: All 107 patients registered with the EIS in Hounslow, London, UK, were eligible for inclusion in this review. Data was collected from the medical records and the Picture Archiving and Communications System. Data was analysed using a microsoft excel data analysis tool. Additionally, comparisons were made between the group of patients with normal scans and that with abnormal scans. Statistical significance was determined using the chi-squared method with a significance of $P < 0.05$.

Results: 17 patients had documented neuroimaging results. 4 scans were abnormal. There was no significant difference between the group with normal and abnormal scans in terms of gender, abnormalities of physical/neurological health, blood tests and whether the patient had any additional medical conditions. Abnormal scan results did not influence treatment or outcome for any patient.

Conclusions: The abnormal scans were not correlated to clinical indices of history, examination and laboratory tests. Abnormal scans appear to have a low yield in terms of clinical effectiveness.

The findings support selective use of neuroimaging in this cohort of patients. The indications for it usage would appear to rely on clinical judgement as well clinical findings.