

## Impulsivity in Patient with Schizophrenia

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### Introduction:

Impulsivity, conceptualized as impairment in planning and poor intentional and inhibitory control, contributes to deleterious outcomes among clinical populations and has severe clinical repercussions. It is also associated with poor clinical outcomes in patients with schizophrenia including substance abuse, suicidal acts, and aggression. However, the role that impulsivity has in schizophrenia is poorly understood.

### Objectives:

The current study seeks to examine self-reported impulsivity (Barratt impulsivity scale) in patients with schizophrenia and to evaluate its association with clinic and demographic characteristics.

### Methods:

We administered the Barratt Impulsiveness Scale, version 11 (BIS-11) in validated Arabic version to 40 patients with schizophrenia. Inclusion criteria for patients included DSM-IV diagnosis of schizophrenia; diagnoses were confirmed with the Structured Clinical Interview for DSM-IV Axis-I disorders. Patients were considered to be clinically stable, indicated by at least a month since the last mood episode, no medication changes in the previous 6 weeks.

### Results:

In this study, schizophrenia patients have reported higher levels of impulsivity on the BIS-11, which is in the direction we found, although it was not significant in our sample.

### Conclusion:

Impulsivity has been repeatedly identified as a major problem in schizophrenia. The literature revealed several ways of defining and conceptualizing it as well as a variety of measures and an analysis of its consequences. The role of impulsivity in the development of aggression in patients afflicted with schizophrenia and the amelioration of impulsivity by antipsychotic medications is two additional areas that should be researched in the future.