

Psychopathology in Sri Lankan patients with first-episode psychosis

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Abstract

Background

First episode psychosis (FEP) is the first episode of a psychiatric illness with psychotic symptoms. Delay in diagnosis increases the duration of untreated psychosis (DUP) and leads to poorer outcome.

Aims

To explore the psychopathology of patients with FEP presenting to the National Hospital of Sri Lanka (NHSL).

Methods

This was an observational descriptive study. Patients admitted to ward-59, NHSL from March 2012 to November 2013 who met inclusion criteria were considered for the study. Data was collected retrospectively from bed head tickets using a structured questionnaire.

Results

The sample size was 101, of which 57 were male. A majority of the participants were in the 13-26 year

age group. Delusions were the most common psychopathology noted in this sample, with persecutory themes being the most common content. Of the hallucinations, second person auditory hallucinations were the commonest type. Non-euthymic mood was seen in over two-thirds of participants, with depressed mood being the most common finding. Insight was poor in over half the participants. Schizophrenia was the most common diagnosis noted in this group of patients, followed by mania with psychotic features.

Conclusions

Persecutory delusions, second person auditory hallucinations, mood and speech abnormalities were prominent among participants of this study. A better understanding of psychopathology in FEP may help to reduce DUP.

Key words: First episode psychosis, psychopathology, Sri Lanka

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Introduction

First episode psychosis (FEP) refers to the first episode of a psychiatric illness which presents with psychotic symptoms. Identification of the first episode can be difficult and delayed especially if the onset is insidious. Early identification of the first episode is of crucial importance as early interventions lead to better outcomes. Psychopathology during the first episode can be variable and often deviates from the characteristic descriptions of more established illness.

The onset of FEP often affects young people in their teens or in their 20s (1-3). Hafner et al. in their study of 276 first-admitted patients with schizophrenia aged 12-59 years, described a predominance of persecutory delusions in older patients, compared with younger patients who were reported to have more non-specific psychotic symptoms (4). This suggests that the

phenomenology in young first episode patient may differ from those with more established illness.

Studies in patients with established schizophrenia suggest that themes of delusional beliefs are related to themes of life problems and goals (5, 6). As life issues of younger patients differ from those of older patients a difference in themes of delusions and hallucinations can be expected.

The duration of untreated psychosis (DUP) is defined as the period between onset of symptoms of psychosis and the start of antipsychotic treatment (7). A long DUP is associated with a poor treatment outcomes (8). Lack of awareness about the phenomenology of the first episode may lead to delay in identification of the disorder and a long DUP.

Published studies that have explored the phenomenology of the first episode patient are scarce. In one study