

P03-82 - RECOVERY STYLES AFTER THE FIRST EPISODE OF PSYCHOSIS

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Recovery from a psychotic episode is a dynamic process after the devastating effects of being diagnosed with a serious mental illness, or the trauma of being hospitalized, rather than a cure or the absence of symptoms. Psychological recovery implies finding and maintaining hope, the reestablishment of a positive identity, finding meaning in life, and taking responsibility for one's life.

Objective: The stages of the subjective psychological process of recovery after the first psychotic episode were explored; since psychological functioning, as well as symptoms and social functioning in the critical period probably are the most important long-term outcome predictor variables.

Methods: The RSQ (Drayton, et al., 1998) and the STORI (Andresen, et al., 2006) were used to assess 30 patients (72.4% males) recovering from the first episode of a non-affective psychosis, 3 to 9 months after their clinical discharge. The mean age was 24.34 (SD=4.5, range=17-34).

Results: The RSQ stages of recovery were: Tendency toward sealing-over (7.7%), Mixed, sealing-over predominates (42.3%), Mixed, integration predominates (38.5%), and Tendency toward integration (11.5%). The STORI stages of recovery were: Moratorium (11.5%), Awareness (31.0%), Preparation (27.0%), Rebuilding (11.5%), and Growth (19.0%). Significant correlations were found between better recovery stages and patient's adherence to treatment ($\chi^2 = 9.579$, $p = 0.008$). Correlations between recovery stages and symptoms, neuropsychological functioning, and other variables were also explored.

Conclusions: Recovery styles of Integration and Growth significantly correlate with treatment adherence, a better symptomatic (less negative and general symptoms) and functional recovery, but not with DUP, stigma, or neuropsychological variables.