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RECOVERY VERSUS REMISSION IN SCHIZOPHRENIA AND RELATED PERSISTENT PSYCHOTIC DISORDERS: NO CONTRASTING BUT COMPLEMENTARY MODELS V. Fricchione Parise¹, G. Balletta¹, M.R. Landolfi¹, G. Manna²

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At present there is no consensus on defining "Recovery" in schizophrenia, while there is an accepted definition of "Remission". Remission model considers "stability" the treatment primary goal and, once achieved, focus is on mainteining stability and preventing relapse. This model reflects a condition where are absent prominent symptoms but may be present some mild symptoms of schizophrenia, retaining not realistic absence of any symptoms. It would require treating an acute psychotic episode, then there still may be a range of no detectable or persistent and disabling symptoms:remission and level of functioning are related but not the same.Some patients could have good level of functioning despite persistent symptoms and others could meet remission criteria despite considerable impairments. Remission is an obteinable outcome for many psychotic outpatients: the point of departure between manteinance and recovery-oriented model happens only after "stability" is achieved;no one could recover in face of repeated crisis, hospitalisation or unrelenting psychotic symptoms. Unfortunately two causes have resulted in a relative neglect of the concept of recovery from psychotic illness: the divide between mainstream biologically oriented psychiatry and the psychiatric rehabilitation movement; the misunderstanding fact that term "recovery movement" is sometimes construed as anti-medication or anti-psychiatry orientation. Irrefuteble point is that recovery model not rejects the importance of remission:stability and relapse prevention. The recovery model besides asserts that achieving remission is the beginning and not the end of treatment plan: then there will be continued efforts to work with patient, family, caregiver, to continue to achieve further improvements in life goals. The "Recovery" patient-centred model have to be embraced as prymary goal by mainstream organizations and services in Mental Health.