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ENTRY INTO SCHIZOPHRENIA IN ADOLESCENCE: CLINICAL AND THERAPEUTIC FEATURES

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Introduction: Time of profound change, adolescencethis is a period of development where a psychodynamic point of view, can be activated archaic defense mechanisms to meet psychological difficulties that may be encountered adolescents. Once the defense mechanisms fail, the evolution towards schizophrenia can be.

Objectives: Study of clinical and therapeutic aspects of first psychotic episodes occurring in adolescence, having evolved later to schizophrenia.

Materials and methods: Descriptive retrospective study on 40 subjects whose ages are between 16 and 19 years admitted to our psychiatric institution for entry into schizophrenia. The information was collected through a pre-established form. Data analysis was performed by SPSS software version 11.

Results: 71.4% of subjects who received the initial diagnosis of schizophrenia were male, family history of schizophrenia and mood disorders were found with respective rates of 19% and 14.2%. The average time of treatment was 13.5 months. The first problems identified by families were: sleep disturbance, irritability, aggressiveness tend to hetero, difficulties in attention and concentration, exaggeration of social isolation and somatic complaints. Psychotic symptoms were found most emotional blunting, delusions and auditory hallucinations. After 2 years of follow up, 38% of subjects who carried the diagnosis of schizophrenia were reinstated at least once, and only 28.5% of subjects had continued their studies.

Conclusions: Schizophrenia is the major fear facing psychotic disorders occurring in adolescence. And it is important to note the diagnostic difficulties and the frequent confusion between schizophrenia and bipolar disorder in adolescence. Great care practitioner is required before any diagnostic decision.