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BIRMINGHAM RISK, RESILIENCE, INTERVENTION TREATMENT AND EVALUATION PROJECT

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Aim: To track the levels of emotional dysfunction, symptoms, risk and resilience factors and responses to treatment in the Ultra High Risk (UHR) group.

Background: There has been an increasing interest in the study, detection and treatment of individuals at UHR of developing psychosis. MacGorry et al. (2003) have put forward criteria for identifying UHR, who have been found to have a 40% chance of making the transition to psychosis within one year (Yung et al., 1998). Research trials are ongoing to study whether CBT can prevent these individuals from developing psychosis completely, or at least delay its onset (Morrison et al., 2005).

Method: 100 participants (16-35 years old) were recruited and assessed from the Early Detection and Intervention Team (ED: IT) over a two-year follow-up period. Inclusion criteria were based on the SIPS (McGlashan et al., 2002). Participants were asked to complete questionnaire measures at baseline, 6-month and 12-month follow-up. The baseline measures were: Beck Anxiety Inventory; Beck Depression Inventory; Dissociative Experience Scale; Social Comparison Scale; Social Phobia Scale; Social Interaction Anxiety Scale and Eysenck Personality Inventory. The follow-up measures were: Trauma and Distress Scale; Childhood Trauma Questionnaire; Other as Shamer; MOPS, RAAS: Pathways to care; Premorbid Adjustment Scale; Chart of life events and Schizotypal Personality Questionnaire.

Results: Study is still ongoing.

Discussion: Our preliminary findings seem to suggest that different risk factors have consistent detrimental effects on mood regulation and symptom contention. It might be possible to manage these factors in at-risk clients in psychological therapy.