

## FAMILY FUNCTIONING, EXPRESSED EMOTION AND FAMILY BURDEN IN RELATIVES OF FIRST-EPIISODE AND CHRONIC PATIENTS WITH SCHIZOPHRENIA AND BIPOLAR DISORDER: PRELIMINARY FINDINGS

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**Introduction:** The influential role of family in the outcome of chronic mental illness is well documented; however there has been relatively little research on the intrafamilial relationships of people experiencing their first episode of psychosis (FEP).

**Objectives:** To investigate possible differences in family environment between FEP and chronic patients with schizophrenia and bipolar disorder.

**Aims:** To compare family measures between relatives of FEP and chronic psychotic patients.

**Methods:** Family functioning (FACES-IV), expressed emotion (EQ), family burden (FBS) and psychological well being (GHQ-28) were assessed in relatives of 30 FEP and 30 chronic patients.

**Results:** Multivariable linear regression models adjusted for confounders revealed that relatives of chronic patients scored significantly lower in balanced cohesion ( $\beta$  coefficient -4.27, 95% CI: -08.03, -1.71) and balanced flexibility ( $\beta$  coefficient -4.01, 95% CI: -6.91, -1.10), as well as communication ( $\beta$  coefficient -6.61, 95% CI: -11.70, -1.50) and satisfaction scales ( $\beta$  coefficient -7.32, 95% CI: -13.23, -1.41). Relatives caring for a chronic patient had significantly higher scores in critical comments ( $\beta$  coefficient 7.81, 95% CI: 3.95, 11.68) and emotional overinvolvement ( $\beta$  coefficient 3.70, 95% CI: 0.24, 7.16). They, also, reported higher objective ( $\beta$  coefficient 12.23, 95% CI: 3.76, 20.71) and subjective ( $\beta$  coefficient 2.79, 95% CI: 0.45, 5.14) burden, as well as poorer psychological well being ( $\beta$  coefficient 12.23, 95% CI: 3.76, 20.71).

**Conclusions:** These findings suggest that chronicity adversely affects patients' family. Early intervention strategies are needed to reduce family burden which in turn may adversely affect the course of the patient's illness.