

P03-71 - DECISION MAKING, WORKING MEMORY AND EXECUTIVE FUNCTIONS IN SCHIZOPHRENIC PATIENTS

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Introduction: Schizophrenia is a disorder related with decline in cognitive functioning. Deficit of working memory and executive functions in schizophrenia is consistently reported. On the other hand, studies of decision making in schizophrenia bring contradictory results.

Aims: The aim of the study was to assess decision making and executive functions in clinically stable schizophrenic patients.

Methods: The study included 25 clinically stable schizophrenic patients (7 female, 18 male), aged 31 ± 6 years and 25 age, sex and education years matched healthy controls. Decision making was assessed with Iowa Gambling Task (IGT). Working memory and executive functions were assessed with Wisconsin Card Sorting Test (WCST) and Trail Making Test (TMT). Psychometric assessment was provided with Positive and Negative Symptoms Scale (PANSS)

Results: No significant differences in performance on IGT between schizophrenic patients and healthy subjects were found. Schizophrenic patients made more perseverative ($t=-4,05$; $p=0,00$) and nonperseverative errors ($t=-4,35$, $p=0,002$), gave less conceptual level responses ($t=-5,35$; $p=0,00$), completed less categories ($t=-4,73$, $p=0,00$) and used more cards to complete first category ($t=-3,98$, $p=0,00$) in WCST. They also needed more time to complete part A ($t=-5,62$; $p=0,00$) and B ($t=-4,06$; $p=0,00$) of TMT test.

Conclusions: No significant differences in performance on IGT between schizophrenic patients and healthy subjects were found. On the other hand, schizophrenic patients performed significantly worse on all measures of WCST as well as in TMT test.