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SOCIAL SKILLS VS. NEUROCOGNITIVE TRAINING IN PSYCHOTIC PATIENTS

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Introduction: It has been hypothesized that cognitive remediation with adjunctive psychiatric rehabilitation would be associated with greater improvements in functional outcome than standalone treatment approaches (1).

Moving from these observations our group designed an individualized rehabilitation program including a computerized cognitive training (CCT) and social skills training (SST), which showed promising results (2).

A critical evaluation of recent studies examining standalone and combined treatment approaches included the understanding of the differential impact of the two approaches among crucial areas for future research (3).

Objectives: The present study compared the effects of CCT and SST on several indices of outcome in psychotic patients. Fifty-eight patients with schizophrenia or schizoaffective disorder were randomly assigned to one of two treatment groups: CCT or SST. Changes in cognitive, psychopathological and psychosocial indices after 6 and 12 months were compared between the two groups.

Results: After both 6 and 12 months, an improvement of psychosocial indices was observed in both groups, while cognitive functions improved only after CCT; the improvement of psychopathological indices, observed in both groups, was greater in the CCT group. Conclusions: Our findings suggest that CCT is associated with a greater impact than SST on different indices of outcome in psychotic patients. Future research should focus on possible synergistic effects of cognitive remediation and social skills training on functional outcome. References:

- 1) McGurk et al, Am J Psychiatry 2007, 164:1791-802
- 2) Galderisi et al, Eur Arch Psychiatry Clin Neurosci 2009, 260:305-15
- 3) Kurzban et al, Curr Psychiatry Rep 2010, 12:345-55