The British Approach to Understanding and Treating Psychosis

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Which boy will develop schizophrenia?
Now we know there are >100 genes, this is not compatible with the idea schizophrenia exists as a discrete entity. It suggests instead that there is a continuum of liability to psychosis.
Environmental Factors that increase the risk of schizophrenia

Childhood Adversity, including bullying
Being a migrant/ethnic minority
Adverse Life Events
Cannabis Use
Living in a City

Incidence of First Episode Psychosis across 16 sites - ranged from 12.0 per 100,000 person years in Palermo to 63.9 per 100,000 in London.

Cambridge = 19
London = 64.9
Netherlands = 40
France = 26
Spain = 21.8
Bologna-Verona = 20
Palermo = 12.8
Proportion of patients in south London with first-episode psychosis attributable to use of high potency cannabis: a case-control study

Marta Di Forti, Arianna Marconi, Elena Carra, Sara Fraietta, Antonella Trotta, Matteo Bonomo, Francesca Bianconi, Poonam Gardner-Sood, Jennifer O'Connor, Manuela Russo, Simona A Stilo, Tiago Reis Marques, Valeria Mondelli, Paola Dazzan, Carmine Pariante, Anthony S David, Fiona Gaughan, Zerrin Atakan, Conrad Iyegbe, John Powell, Craig Morgan, Michael Lynskey, Robin M Murray
Reappraising the long-term course and outcome of psychotic disorders: the AESOP-10 study

C. Morgan¹,²*, J. Lappin²,³, M. Heslin⁴, K. Donoghue⁵, B. Lomas⁶, U. Reininghaus¹, A. Onyejiaka¹, T. Croudace⁷, P. B. Jones⁸, R. M. Murray²,³, P. Fearon⁹, G. A. Doody⁶ and P. Dazzan²,³
How were 387 patients functioning at ten years?

- 65% had no psychotic symptoms at 10 years
- 46% had had none for >2 years (40% of those with a diagnosis of Schizophrenia)

21% overall and 19% of people with schizophrenia had no psychotic symptoms and were not taking antipsychotics

Morgan et al. Psychol Med 2014;44:407–419
1. Clinical outcome is better than we think

2. There is no evidence of intrinsic progressive brain changes

3. There is no evidence of progressive cognitive changes
What events precede psychosis?

Factors:
- Early environmental factors
- Stress isolation
- Drug abuse
- Genetic factors
- Neurotransmitter genes

Conditions:
- Subtle motor, cognitive and social deficits
- Social anxiety, depression
- Neurotransmitter dysregulation

Phases:
- Premorbid phase
- Prodrome phase
- Onset

An Integrated Model of Schizophrenia

The UK View of Psychosis and Schizophrenia

• Less wedded to the medical model of schizophrenia as a brain disease
• Regard Psychosis as one end of a continuum of psychosis, and schizophrenia simply as the most severe variety
• More open to the idea that social factors play a major causal role
• Patients and their families have to be involved in development of services
• Each geographic area is served by a “catchment area” service
• Average length of a hospital admission is about 28 days
• Within each service, the local mental health team has a responsibility for the psychotic patient until he/she is handed to another service e.g. family doctor/specialist service
• Patient must have a care plan on discharge including place to live and follow-up care
Advantages and disadvantages of a socialist system

• It is “free”
• National standards can be set (though not always met)
• Evidence-based treatments are prioritised
• Funding is dependent on Government Policy – UK spends about 9% of GNP on Health Care, same as in main European countries
THE ABANDONED ILLNESS

A report by the Schizophrenia Commission
What do people appreciate?

1. Kindness and competence
2. Continuity of care.
3. Home Treatment
4. Early Intervention.
Most helpful people

• Community nurses – 25%
• Psychiatrists – 18%
• Social workers – 17%
• Psychologists – 12%

Most helpful treatments

• Medication – 73%
• CBT – 40%
• Peer support – 30%
Patient satisfaction with care received

Proportion reporting that they were satisfied with the care they received over the last 12 months

Source: Service user survey

Psychological therapies:
Cognitive behavioural therapy (CBT)

Has CBT ever been offered?

Source: Audit of practice

Prescribing (Standard 9): Prescribing within BNF recommended maximum doses

Percentage of service users across Trusts whose total daily dose of antipsychotic medication exceeds the BNF recommended maximum.

Source: Audit of practice tool

Early Intervention for psychosis (2001)

- Provide treatment for the first 3 years after onset

- All services must provide this

- Two main components
  - Early detection
  - Integrated psychosocial treatment

- Evidence for benefit of the assertive follow-up component of EIS on outcome (relapse) is clear with two high quality RCTs

- But benefits not sustained at 5 years possibly because by then pts transferred to standard care
Psychological treatments should be much more widely available.
Cognitive remediation treatment (CRT)

- Many studies show that CR has a beneficial effect on cognition
- It also improves occupational function and this is a durable effect (effect on symptoms is not)
- Not yet widely available
AVATAR Therapy: AVATAR
(Leff et al 2013)

- Empty chair replaced by computer simulation (avatar).
- The avatar is constructed to look like and sound like what the patient reports experiencing.
- Clinician speaks as himself or through voice transforming software as the ‘voice’
- Therapy ingredients: exposure-desensitisation, increase sense of power and control over the voice, coping and other distress management techniques
- 7 x 45 min sessions
Does it work?

- **Leff et al 2013**
  - Pilot RCT (n=24) Compare therapy with waiting list control
  - 3 patients stop hearing voices altogether
  - Significant reductions in other measures
  - Small study, inactive control, large drop out

- **Craig et al ongoing**
  - RCT (n=150) compare avatar to supportive counselling control for attention/time
  - Trial complete, awaiting outcome data
  - >80% complete therapy
  - > 80% complete end of therapy outcomes (blinded)
  - Outcome results including 6/12 follow up expected September 2016
Schizophrenia Commission pointed out that people with schizophrenia die 15 to 20 years early.  

- Obesity, diabetes, heart attacks, strokes  
- Most patients haven’t had a physical health check in the last year  
- Whose responsibility is it?  
  - Officially GPs, but many don’t like treating schizophrenic patients  
- Most psychiatrists turn a blind eye to their patients smoking cigarettes  

Monitoring of cardiometabolic health risk factors

Percentage of service users who had monitoring of each of the six individual cardiometabolic health risk factors and the percentage who had all six monitored, once in the past 12 months.

Source: Audit of practice tool

Only 9% had all six risk factors monitored.

<table>
<thead>
<tr>
<th>Health Risk Factor</th>
<th>Percentage Monitored</th>
<th>Sample Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>All six principal cardiometabolic health risks monitored</td>
<td>9%</td>
<td>509</td>
</tr>
<tr>
<td>Family history</td>
<td>20%</td>
<td>985</td>
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<tr>
<td>Smoking status</td>
<td>90%</td>
<td>4,992</td>
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<tr>
<td>BMI</td>
<td>50%</td>
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<tr>
<td>Blood glucose</td>
<td>60%</td>
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<tr>
<td>Lipids</td>
<td>40%</td>
<td>3,210</td>
</tr>
<tr>
<td>Blood pressure</td>
<td>40%</td>
<td>3,445</td>
</tr>
</tbody>
</table>

ACUTE PSYCHOTIC EPISODE

Response

Remission

RECOVERY

Relapse

Partial response

Refractoriness