

EXECUTIVE FUNCTIONS IN FIRST EPISODE REMITTED PATIENTS WITH SCHIZOPHRENIA

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Introduction: Literature suggests that schizophrenia (SCZ) could, early in the evolution, involve significant deficits in executive functioning. However, little is known about patients with recent onset first episode. Besides, only few studies focused on symptom-free intervals. Furthermore, most of them included patients on polymedication of antipsychotics including also add on psychotropics.

Objectives: We aimed to investigate executive dysfunction in first-episode schizophrenia remitted patients with recent onset of the disease, receiving a strict monotherapy of antipsychotics.

Aims: Enhance the existence of executive dysfunction early in SCZ limiting the impact of relapses, medication and symptoms.

Methods: 25 first episode outpatients with schizophrenia, having less than 3 years illness duration were included. All patients received a monotherapy of antipsychotic with no antidepressant, mood stabilizer, hypnotics or benzodiazepines. 25 healthy participants were matched one by one, according to age and educational level.

For clinical evaluation, PANSS was applied. Executive functions were assessed with the Davidson et al. (2006) computerized battery designed to manipulate both inhibition and cognitive flexibility. It encompasses interrelated tasks that enabled us to independently vary demands on these abilities.

Results: Compared to controls, patients showed significant differences in the percentage of correct responses and in reaction time attesting difficulties in inhibition and in cognitive flexibility.

Conclusions: Our results emphasize the notion that executive dysfunction in schizophrenia stands for itself early in the disease, cannot be only explained by relapses, duration of the disease, impact of medication nor symptoms.