

Course Title/Code: **Course and Outcome of Psychotic Disorders (MMPH6192)**

Department: Psychiatry

Objective: In this module, we will consider the longitudinal course of disease in the lifespan of patients with psychotic disorders. Participants will be introduced to the distinctive stages of the disorder, including the premorbid phase, early and late prodromal phase, first-episode psychosis, remission, relapse, residual and refractory states. Conceptual backgrounds and modern definitions of each of the disease stages, as well as the nature of key outcome dimensions (e.g., functioning, quality of life) will be considered. Data from classic long-term follow-up studies will be considered to illustrate the evolution of symptoms in psychotic disorders. Participants will also be introduced to the use of the longitudinal life-course approach in individual case analysis and formulation – an important skill for identifying potential course and risk factors for adverse outcome in patients, which will be further developed in elective modules.

Content:

Clinical course and outcome in psychotic disorders

- Importance of studying course and outcome
- Overview of longitudinal course of schizophrenia and other non-affective psychoses
- Historical perspective on prognosis
- Neurodevelopmental and neurodegenerative theories
- Implications: using longitudinal approach to case analysis and formulation

Stages in psychotic disorders

- Premorbid stage, prodromal, and first-episode psychosis staging in early psychosis
- Defining premorbid stage: non-specific signs, assessments
- Defining prodromal phase, assessments and monitoring
- Transition to psychosis

Remission and recovery

- Recovery concept
- Clinical definitions of symptomatic remission, functional remission and recovery in schizophrenia
- Measurement issues: functional capacity vs real-world functioning
- Perception on recovery: patients' perspective

Relapse in psychosis

- Relapse rates and relapse predictors
- Naturalistic studies
- Local studies on relapse prevention and implications

Residual and refractory psychosis

- Clinical pictures of residual and refractory states
- Clinical management
- Clozapine

Comorbidities in psychotic disorders

- Depression
- Obsessive compulsive disorder
- Substance abuse
- Anxiety disorder
- Personality disorder

Classic long-term outcome studies

- Key outcome measures and assessments: functioning, quality of life etc
- Classic long-term studies, contrast with short-term outcome studies
- Local data on outcome studies
- Challenges in carrying out long term follow up outcome studies
- Group presentation

Prognostic determinants in psychotic disorders

- Prognostic factors (I): Premorbid factors
- Premorbid adjustment, intelligence, baseline functioning
- Prognostic factors (II): Illness factors
- Symptom dimensions: negative symptoms, affective symptoms, persistent or treatment-resistant positive symptoms
- Cognitive impairments
- Diagnostic categories: acute psychosis, schizophrenia, schizoaffective disorder, affective psychosis
- Mode of onset of psychosis, duration of untreated psychosis
- Psychiatric comorbidities, eg, substance abuse, depression
- Prognostic factors (III): Treatment factors
- Treatment adherence
- Prognostic factors (IV): Psychosocial factors
- Social support, expressed emotions

Learning outcomes:

On completion of the course, the students are expected to:

- appreciate the major course types in schizophrenia
- understand the components which determine course types
- appreciate some key longitudinal studies in schizophrenia
- appreciate the longitudinal stability of outcome
- appreciate the key determinants of outcome in schizophrenia
- understand the common outcome dimensions
- understanding the differences and the importance of different stages of the illness.
- appreciate the illness may be delineated into different stages, each with specific needs and predictors of outcome. The illness course can be consider as progressing from one stage to another sequentially.
- be aware of the comorbidity of the psychotic illness and its relationship with the long term outcome.

Prerequisite:

None

Duration:

1 semester; 2.5 hours/week; 24 contact hours

Assessment:

Continuous assessments (40%)

Written examinations (60%)

Remarks:

Priority will be given to research postgraduate students those research projects is on a psychosis-related topic.