



Is Early Intervention in Psychosis Possible?

- Professor Anthony Harris
- University of Sydney
- Prevention Early Intervention and Recovery Service WSLHD

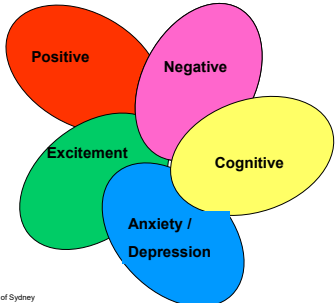
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- What is this thing psychosis?
- Can we treat it?
- What are the issues affecting good treatment?
 - How long should we provide EI?
 - Pharmacological and psychosocial treatment
 - Diversification of care
 - What happens after EI?

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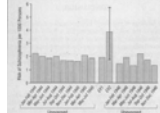

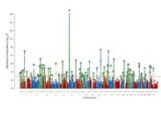

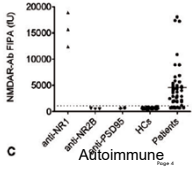
Symptomatology



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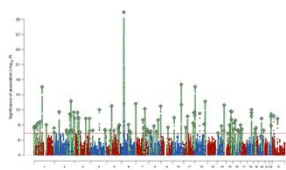
Genetic, Environmental and other triggers

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Genetic vulnerability

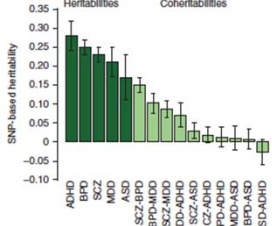


- Genes important in CNS found
 - Dopaminergic transmission
 - glutamatergic transmission
 - Interneurons, oligodendrocytes
- Genes related to the Major Histocompatibility Complex (MHC) and immune system
- Also, high number of de novo copy number variants and rare genetic abnormalities seen in schizophrenia

Ripke et al, 2014. Nature Page 5

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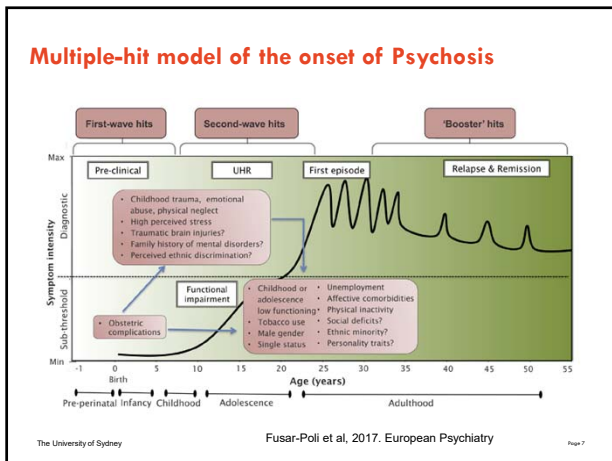
Genetic susceptibility overlaps with other psychiatric illnesses



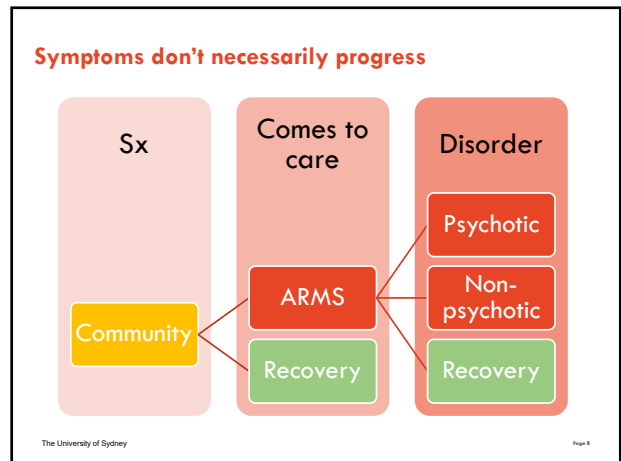
- Strong association between bipolar disorder and schizophrenia
 - Other associations BPD-MDD; Sz-MDD, MDD-ADHD
 - Weak though significant overlap between Schizophrenia and Autistic Spectrum Disorder
 - At least part of the difficulty is the heterogeneity found within disorders

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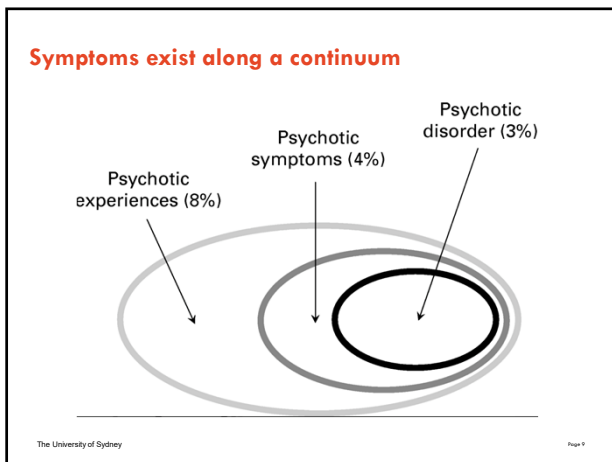
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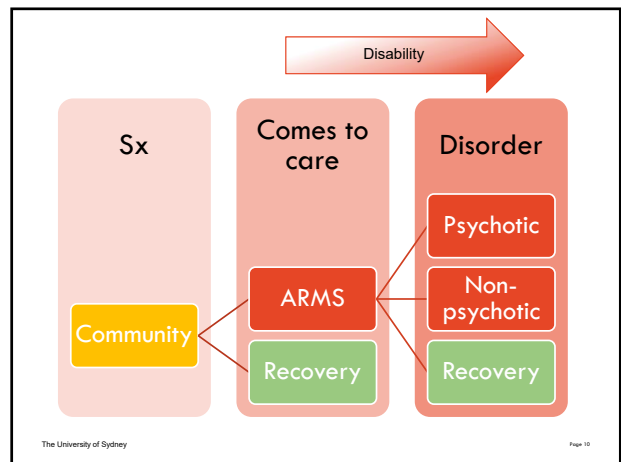
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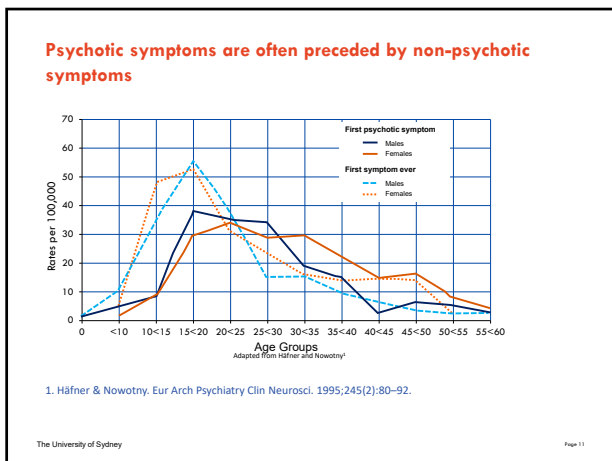
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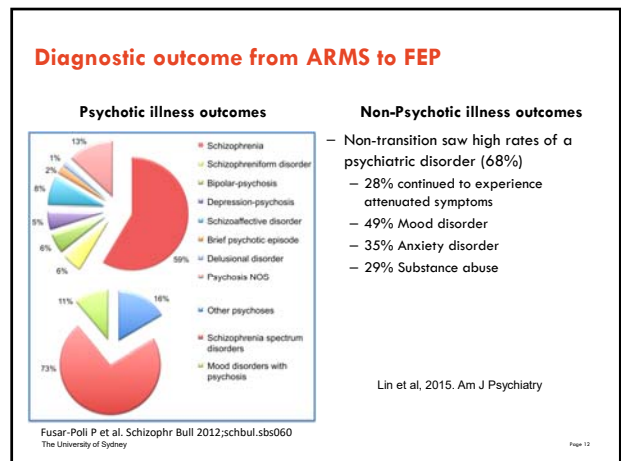
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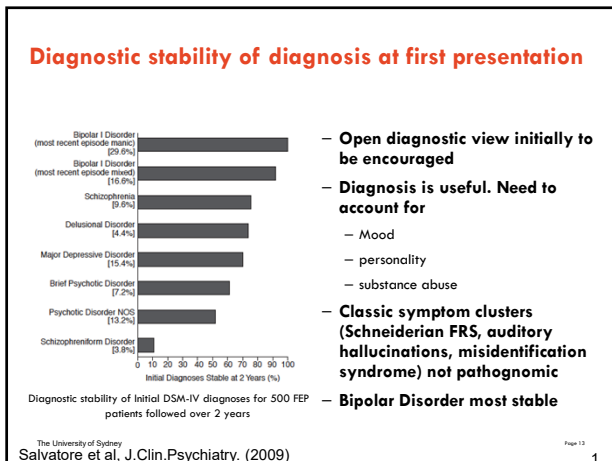
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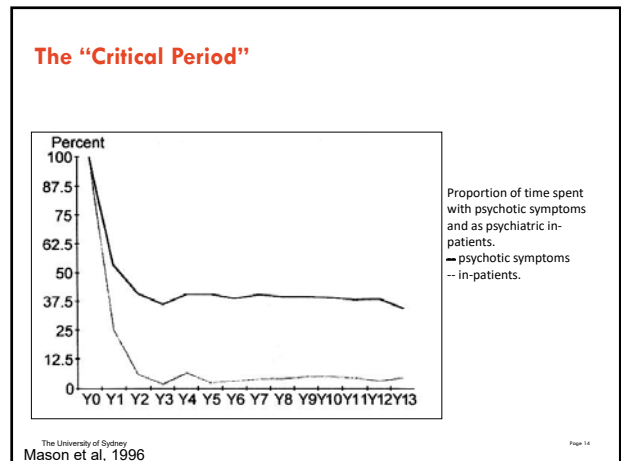
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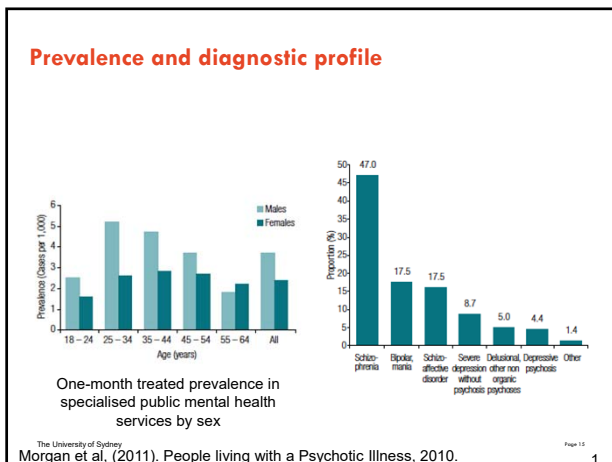
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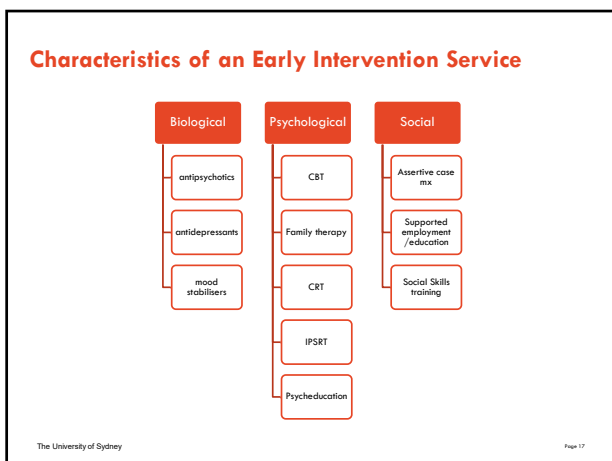
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Characteristics of an Early Intervention Service

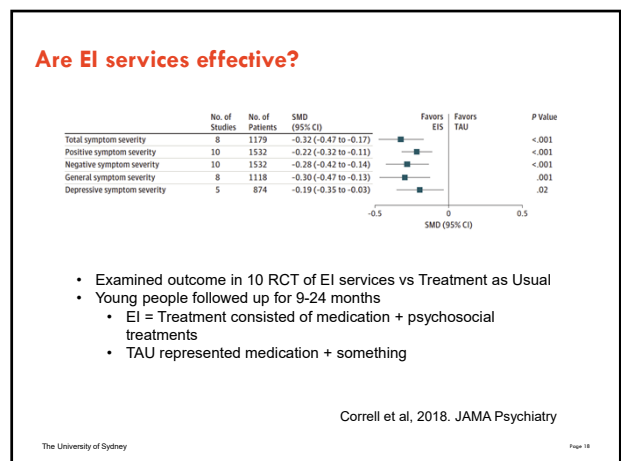
- Age of clients seen
- Multidisciplinary team membership
- Optimistic, recovery oriented
- Community based
- Diversity of treatments
- Consumer participation

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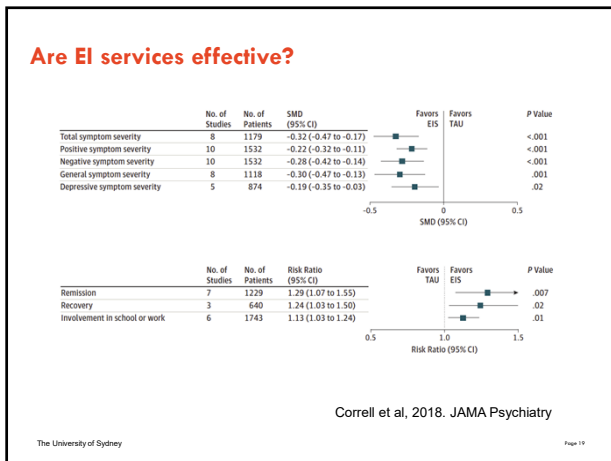
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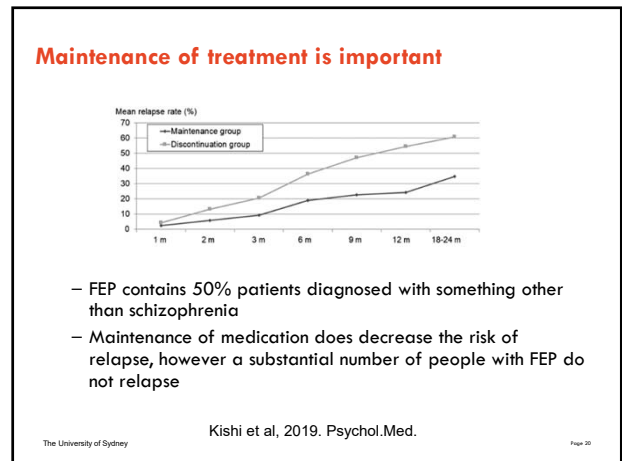
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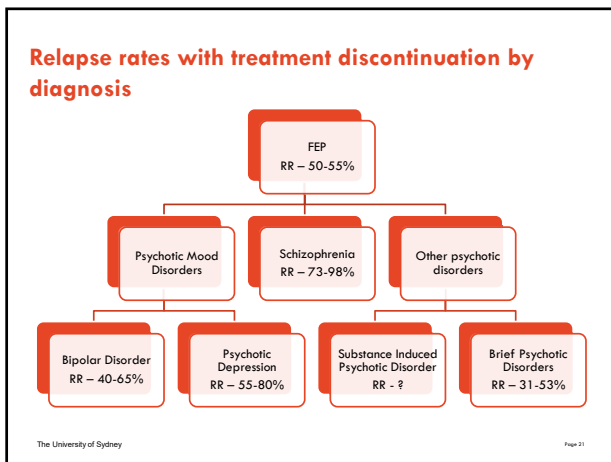
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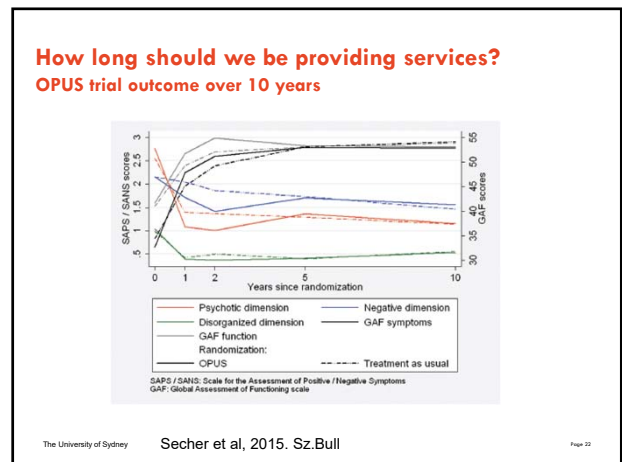
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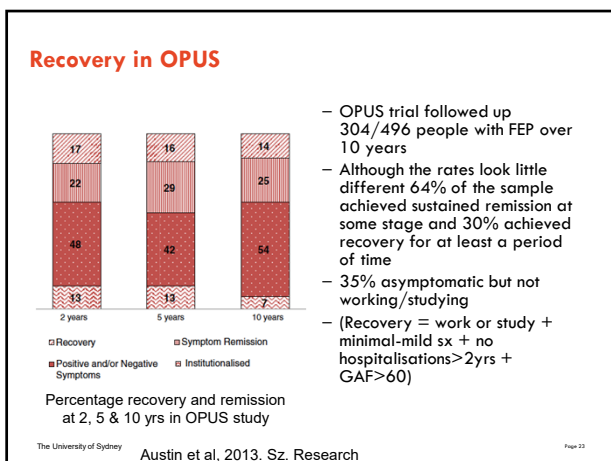
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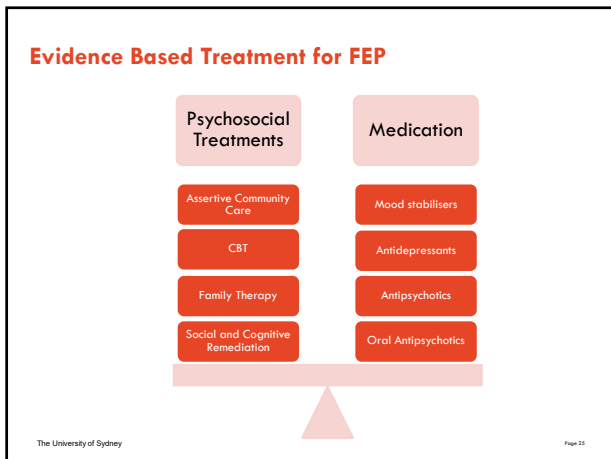
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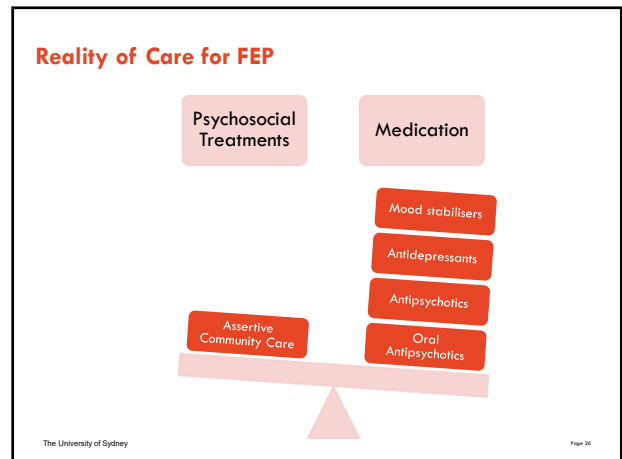
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- ### Recovery in Hong Kong
- Initial treatment with EI services (n=178) resulted in
 - Reduced completed suicide
 - Fewer and shorter admissions
 - More employment
 - At 10 year follow-up
 - Advantages lost when compared to historical control
 - However, in review (n=107)
 - Clinical remission (48.6%)
 - Shorter DUP
 - Acute onset illness
 - Functional recovery (37.4%)
 - Re-engaged with community
 - Fewer negative symptoms at baseline
 - Better vocational and educational involvement
 - Complete recovery (25%)
 - Planned medication discontinuation
 - Better vocational and educational involvement
- Chan et al., 2015. Psychol. Med
- Chan et al., 2018. Sz.Res

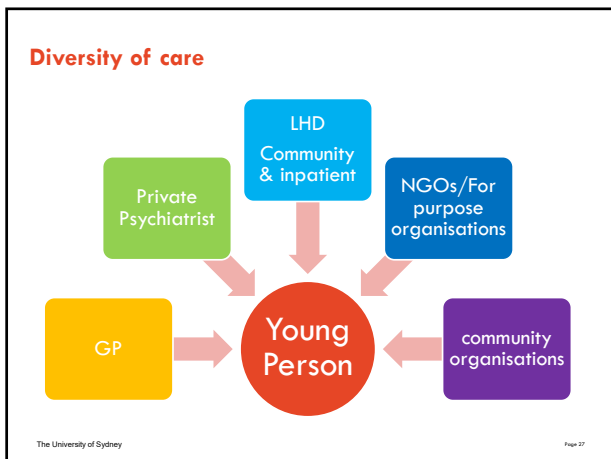
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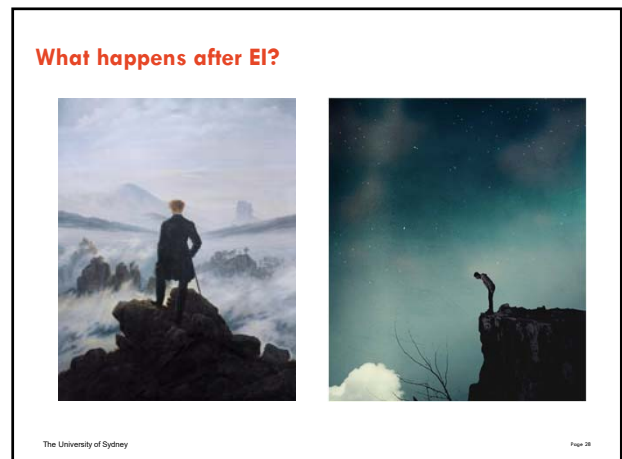
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- ### What happens after EI?
- **Capacity of health system to provide consistent and integrated care**
 - Development of NGO services
 - NDIS
 - **Challenges of NDIS that is funded on disability contrasted with an approach born of optimism**
 - **Anxiety of clinical teams discharging people to the next stage of treatment**
 - **Importance of planning for discharge**
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Contact

Professor Anthony Harris
Professor of Psychiatry
University of Sydney

Email: anthony.harris@sydney.edu.au