

# Early Warning Signs of Psychotic Disorders and the Importance of Early Intervention



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# Mental Health As a Public Health Issue and The Case for Early Intervention

## The Take Home Message

- **Finding Young People with Mental Health Issues Early and Treating Them is Also “Prevention”**

- **It Works!**

- **And ....It Saves Money!**

# Mental Illness Starts Early

- **Half of all lifetime cases of mental illness start by age 14**
- **Three fourths start by age 24**

# Mental Health Problems Start Early

**Anxiety Disorders          6 years old**

**Behavior Disorders          11 years old**

**Mood Disorders              13 years old**

**Substance Use Disorders    15 years old**

## Many Adolescents Have a Mental Illness

- 22% of adolescents have a severe mental health problem at some point during their adolescence

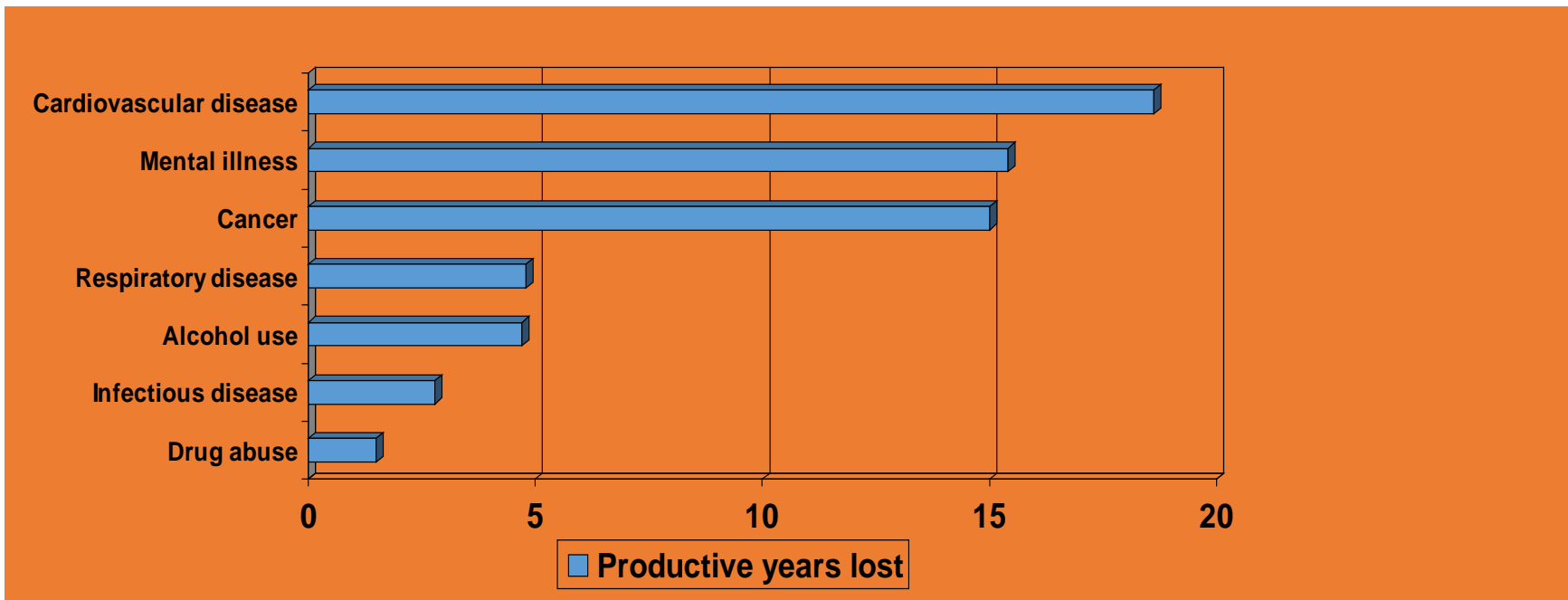
Merikangas, K et al, JAACAP, 49:10, 980-989, Oct 2010

## Institute of Medicine Report 2009

- **Fewer than 1 in 4 children with a Mental Disorder has ever received treatment**

# Mental Health is a Major Public Health Issue

- The World Health Organization predicts that mental disorders will be the leading cause of disability in the world by 2020





# **Why Focus on Psychotic Disorders?**

# Why Focus on Psychosis

- **3 out of 100 people will experience a psychotic episode in their lifetime**
- **Onset is generally in late adolescence or early adulthood**
- **Psychosis can have multiple causes and occur in multiple disorders including Bipolar Disorder, Severe Depression, Schizophrenia, PTSD, Autism, etc.**

# Why focus on Psychosis: Long-Term Course of Schizophrenia

- 1% prevalence of schizophrenia
- 1/3 of all mental health care spending in the U.S. on schizophrenia treatment
- People with schizophrenia take up 25% of the nation's hospital beds
- 10% of people with schizophrenia commit suicide
- Indirect costs of schizophrenia high: loss of work, time and money spent by caregivers, law enforcement costs, etc.
- World Health Organization rated schizophrenia 2nd most burdensome disease in world (15%), after cardiovascular disease (18%)

# Why Focus on Psychosis

- Symptoms of psychosis are treatable and the shorter the duration of untreated psychosis, the better the outcomes;

*However*

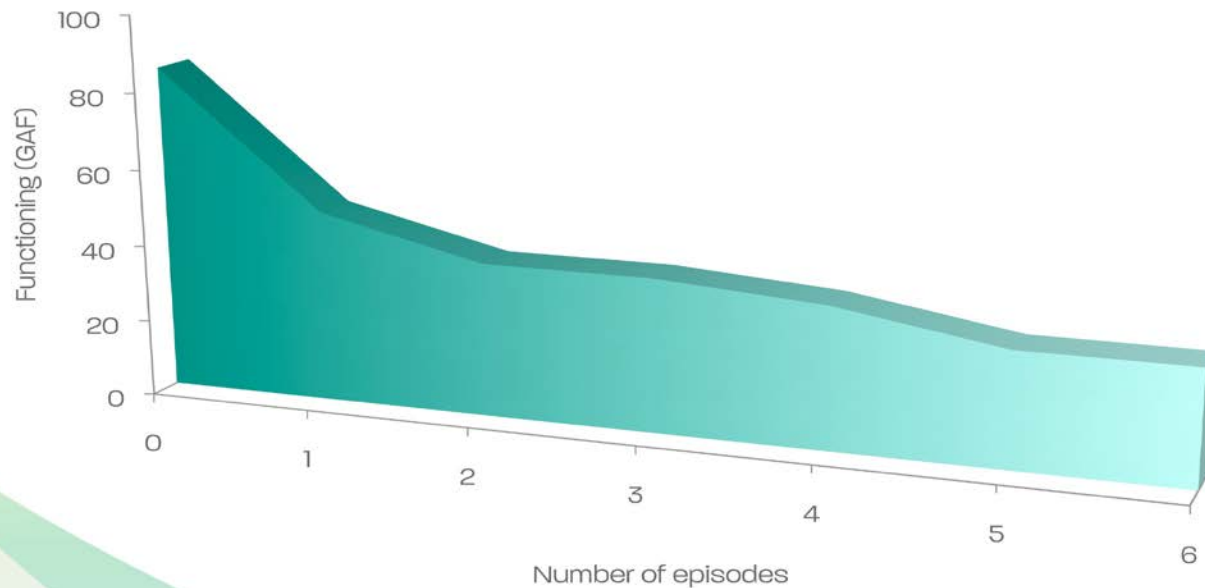
- the average duration of untreated psychosis in the US and Europe is 1-2 years;

*Thus*

- it will take an active effort by all of us to learn the early warning signs of psychosis and to know what to ask when

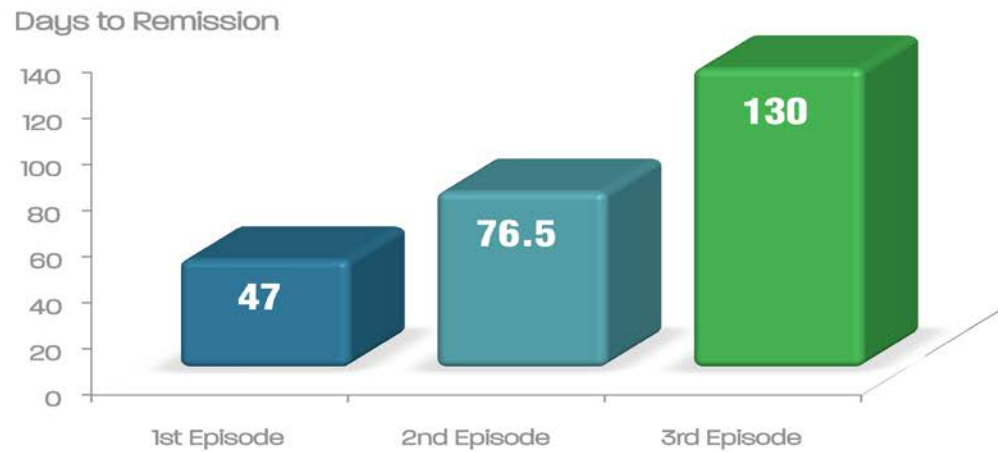
# Why Focus on Psychosis

## Functioning as an Effect of Number of Psychotic Episodes



# Why Focus on Psychosis

## Effects of Multiple Relapses



Adapted from Lieberman, J., et al., J Clin, Psychiatry, 1996; 57: 5-9

# *There is HOPE with early treatment for mental illness...*

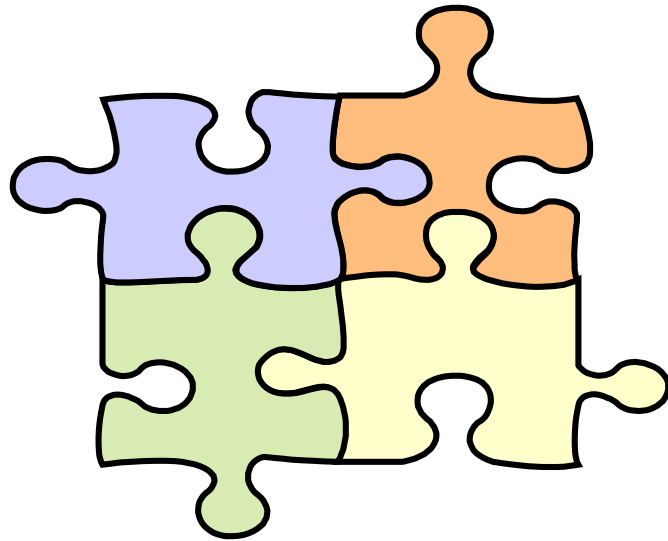
- **Early detection makes a difference**
- **It is associated with**
  - More rapid and complete recovery
  - Preserved brain functioning
  - Preserved psychosocial skills
  - Decreased need for intensive treatments
  - Preserved network of supports

***“I feel certain that many incipient cases might be arrested before the efficient contact with reality is completely suspended.”***

Harry Stack Sullivan, 1927



# Understanding the Spectrum of Psychosis and Early Intervention

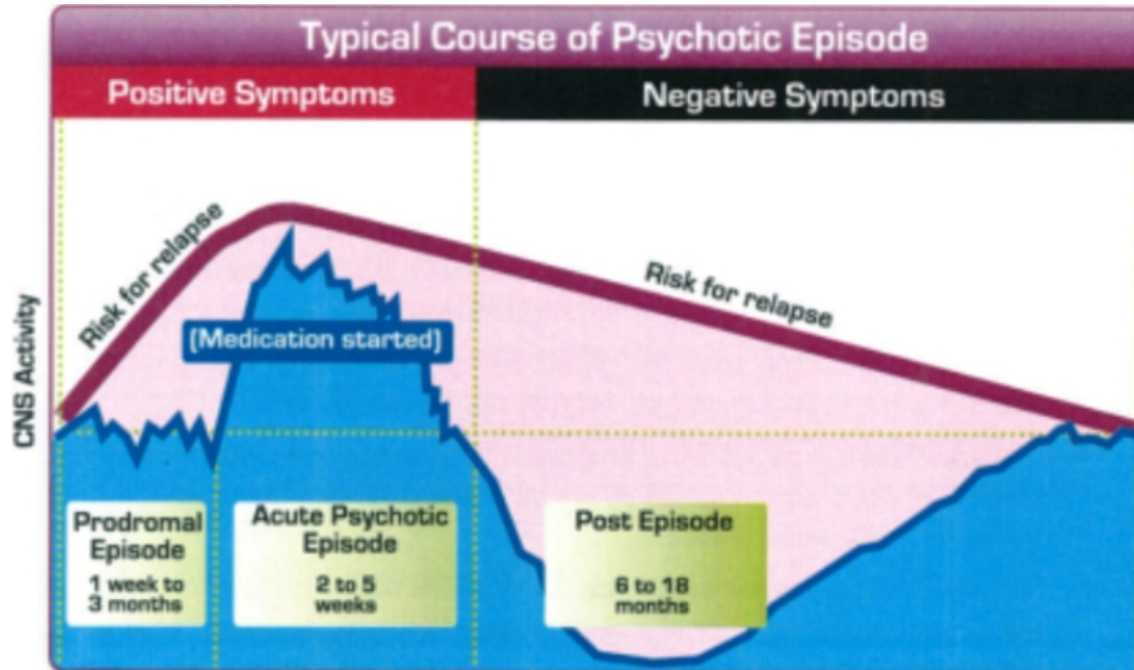


# What is psychosis?

**Any number of symptoms indicating a loss of contact with reality, including:**

- **Hallucinations: most often hearing voices or seeing visions**
- **Delusions: false beliefs or marked suspicions of others**
- **Associated features:**
  - **Neurocognitive impairment**
  - **Behavioral and emotional changes**
  - **Disordered speech**
  - **Sleep difficulties**

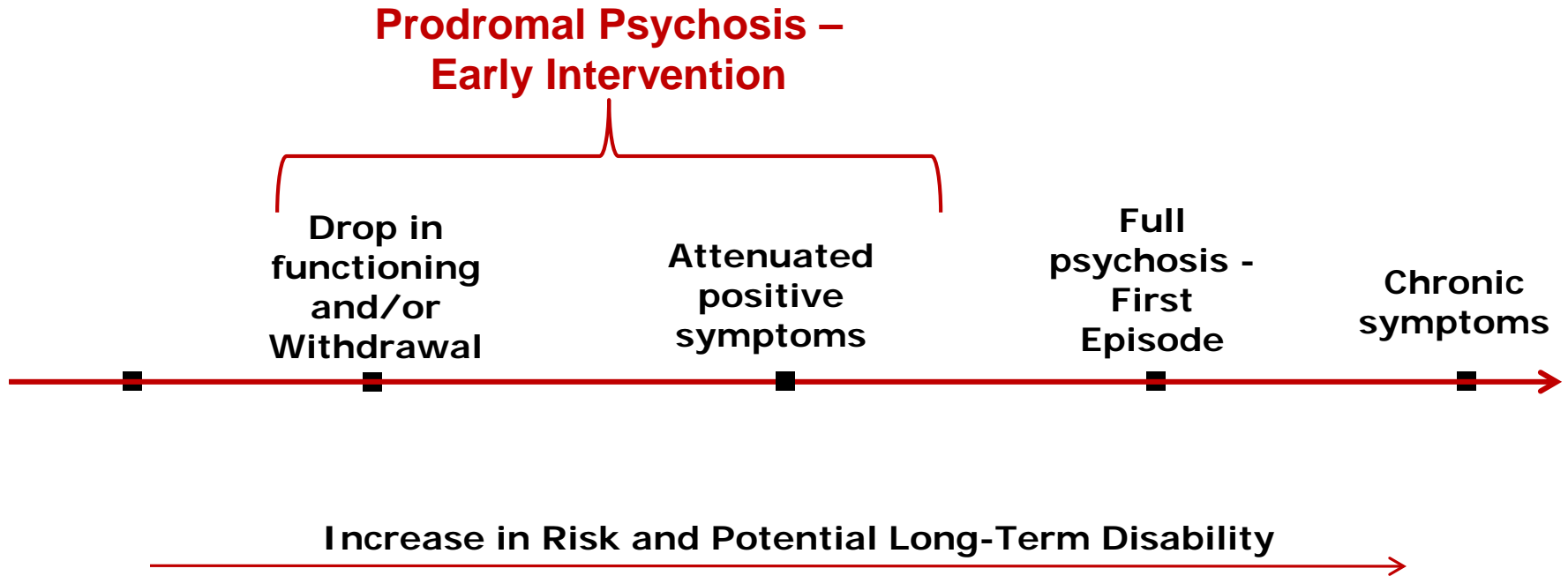
# Course of onset and illness



# The Prodromal Phase

- **Encompasses the period of early symptoms or changes in functioning that precede psychosis**
- **Symptoms generally arise gradually but are new and uncharacteristic of the person**
- **The person retains awareness that something is not normal and thus is more amenable to help**
- **It is only during this phase that prevention is possible**

# Spectrum of Risk for Psychosis



# Signs of Early Psychosis

- 1. A significant deterioration in functioning**
- 2. Withdrawal from family and friends**
- 3. Changes in behaviors, thoughts and emotions**

# Signs of Early Psychosis

- 1. A significant deterioration in functioning**
  - Unexplained decrease in work or school performance
  - Decreased concentration and motivation
  - Decrease in personal hygiene
  - Decrease in the ability to cope with life events and stressors

# Signs of Early Psychosis

continued

## **2. Withdrawal from family and friends**

- **Loss of interest in friends, extracurricular sports/hobbies**
- **Increasing sense of disconnection, alienation**
- **Family alienation, resentment, increasing hostility, paranoia**



# Signs of Early Psychosis

Continued

## **3. Changes in behavior, thoughts, and emotions such as:**

- **Heightened perceptual sensitivity**
- **Magical thinking**
- **Unusual perceptual experiences (illusions, fleeting hallucinations)**
- **Unusual fears (may have insight when questioned)**
- **Disorganized or digressive speech**
- **Uncharacteristic, peculiar behavior**
- **Reduced emotional or social responsiveness (affect, verbal responsiveness)**

# Spectrum of Risk

## No symptoms



## Drop in functioning/ Withdrawal



- Drop in school/work performance
- Avoidance of family/friends
- Loss of interest in hobbies, activities
- Drop in hygiene
- Decrease in motivation and/or concentration
- Marked changes in sleep or appetite

## Attenuated positive symptoms



- Unfounded fears
- Strange/extreme new beliefs or behaviors
- Hearing vague sounds/voices/noises
- Seeing shadows/lights/apparitions
- Changes in speech – difficult to understand

## Full psychosis



- Hallucinations
- Delusions
- Disorganization/severe confusion

# Early Psychosis Symptoms

***I started having paranoid feelings about a year ago. If I really think, things started to happen little by little, but they gradually got worse. I didn't notice because I thought the way I felt was right. And my parents didn't notice because it was so gradual."***

Boydell et al, Psych Rehab J, 2006;30:54-60

# Clinical Tools to help Detect Early Psychosis Symptoms

# PRIME Screen

- **Recommended to be completed as an interview (not a self-report)**
- **For use in clinical practice**
- **Helps put words to difficult concepts**
- **Gives clinicians a tool to ask basic screening questions**
- **Can be incorporated into other MH screening procedures, e.g., intakes**



# PRIME Screen

## Scoring

Positive Score:

- 2 or more items scored at a “6”

OR

- 3 or more items scored at a “5”

Other Guidelines:

- For lower scores you may also want to prompt for duration and distress

# UNM Early Psychosis Programs





# The EARLY Program

## Background

- Part of a 6-site national replication treatment research project called EDIPPP – Early Detection and Intervention for the Prevention of Psychosis Program
- Based on earlier studies conducted in the United Kingdom, Australia, Scandinavia and the United States
- Made possible due to identification of predictors for psychosis and newer atypical medications with fewer side effects

# The EARLY Program

## Key Components

- Study stopped enrolling in May 2010

# UNM Early Psychosis Programs

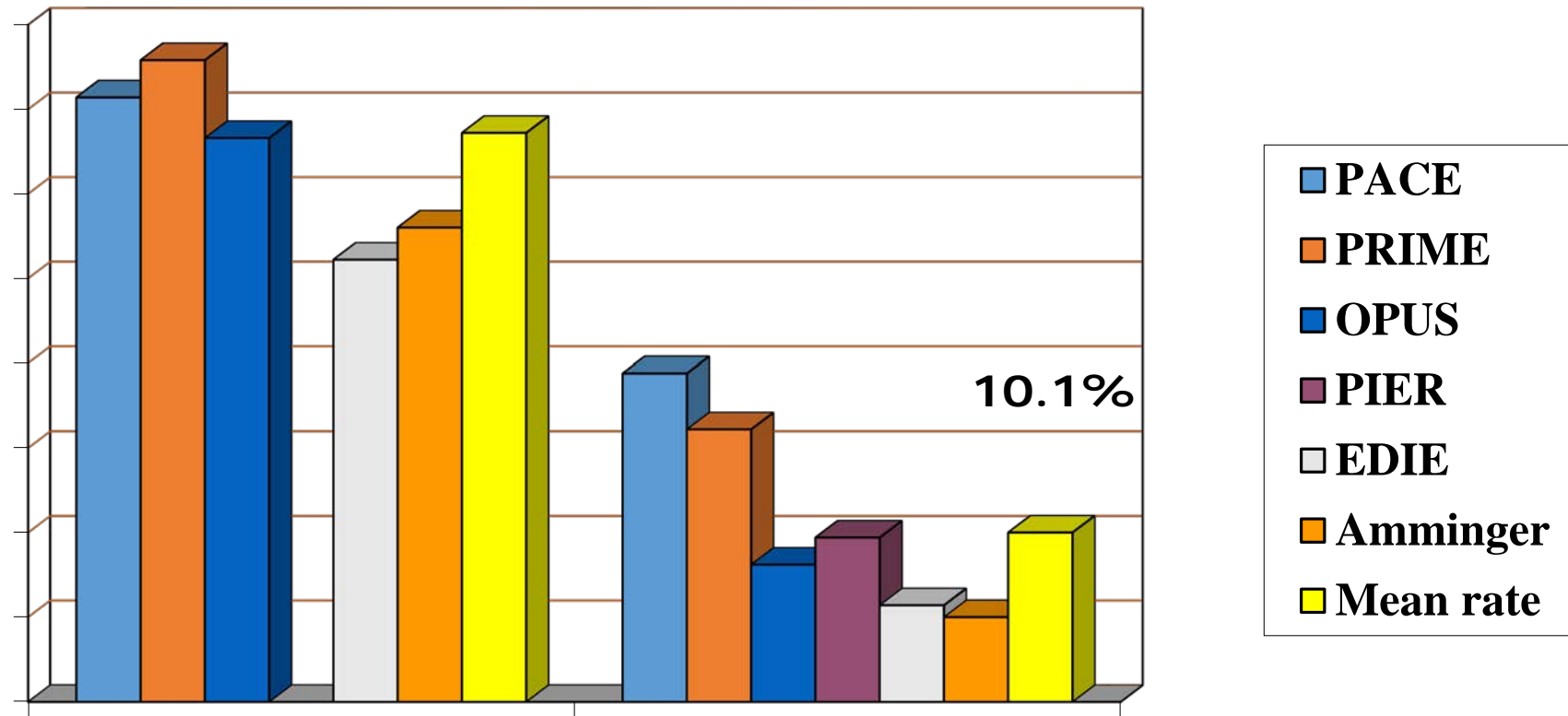


- **A consultation clinic for young people (generally middle to high school aged) from across the state who are experiencing early warning signs of psychosis.**
- **Young people will be seen for up to 3 sessions with our specially trained clinical team (Psychiatrists, Psychologists, Occupational Therapists and Psychotherapists) for evaluation and treatment recommendations.**

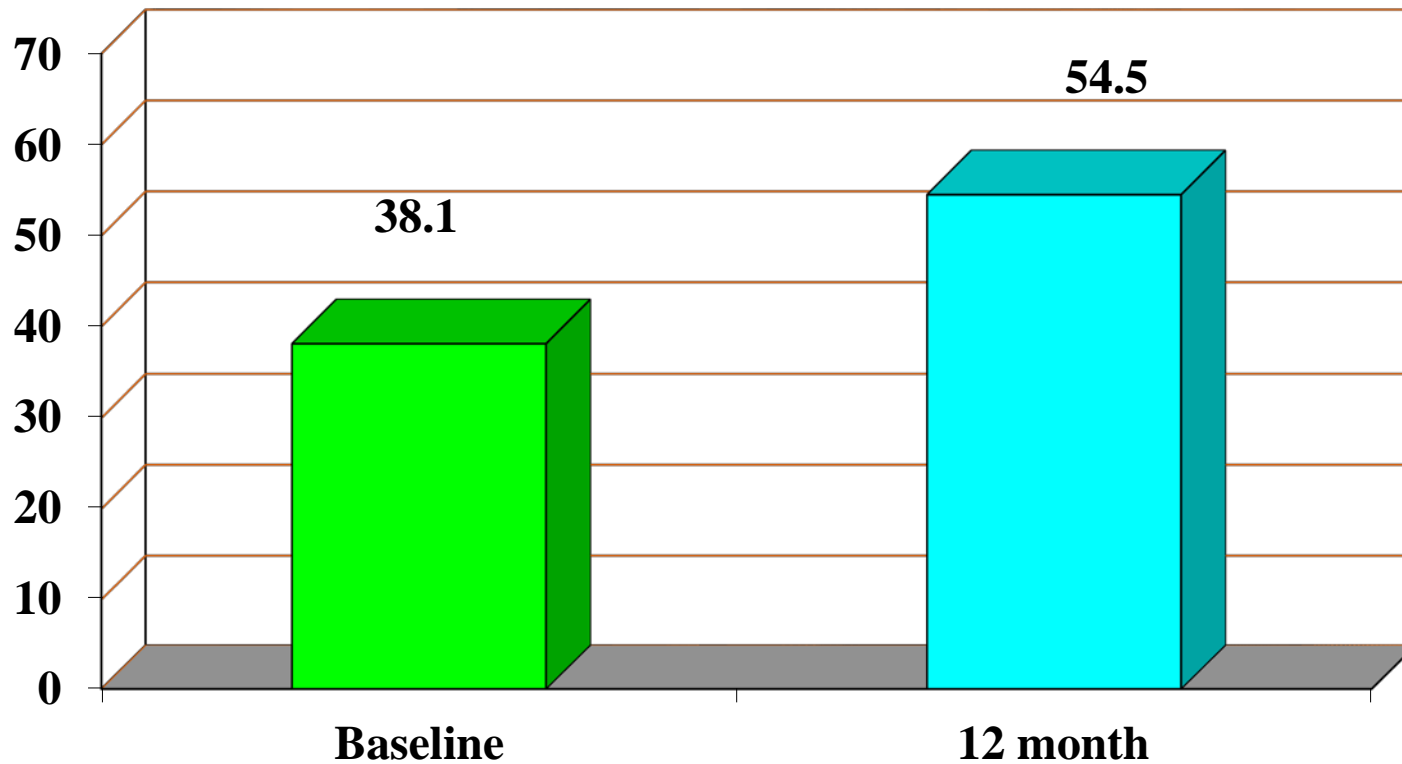
# Initial Results



# Initial Research Results: Psychosis prevention studies: 1 year rates for conversion to psychosis



# Initial Research Results: Overall Functioning: Baseline and 12 months



N=94

***“I would entreat professionals not to be devastated by our illness and transmit this hopeless attitude to us.***

***I urge them never to lose hope; for we will not strive if we believe the effort is futile.”***

Esso Leete, who has had schizophrenia for 20 years

# Contact Us:



**EARLY Hours:**

**8:00 am – 5:00 pm M-F**

**For More Information, call:**

**1-888-NM-EARLY (663-2759)**

**[www.earlyprogram.org](http://www.earlyprogram.org)**