

# Comorbidities in patients with an at-risk mental state and first episode psychosis

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## Background

Non-psychotic axis I diagnoses are highly prevalent in at-risk mental state (ARMS) (1) and first episode psychosis (FEP) patients, the most common being affective and anxiety disorders. However, so far only few studies have examined differences between ARMS and FEP patients or gender effects regarding such diagnoses.

## Objectives

Aim of the present study was to examine i) current and lifetime Axis I diagnoses in ARMS and FEP patients, ii) potential gender differences, and iii) differences between patients with (ARMS-T) and without later transition to psychosis (ARMS-NT), with respect to non-psychotic psychiatric diagnoses.

## Results

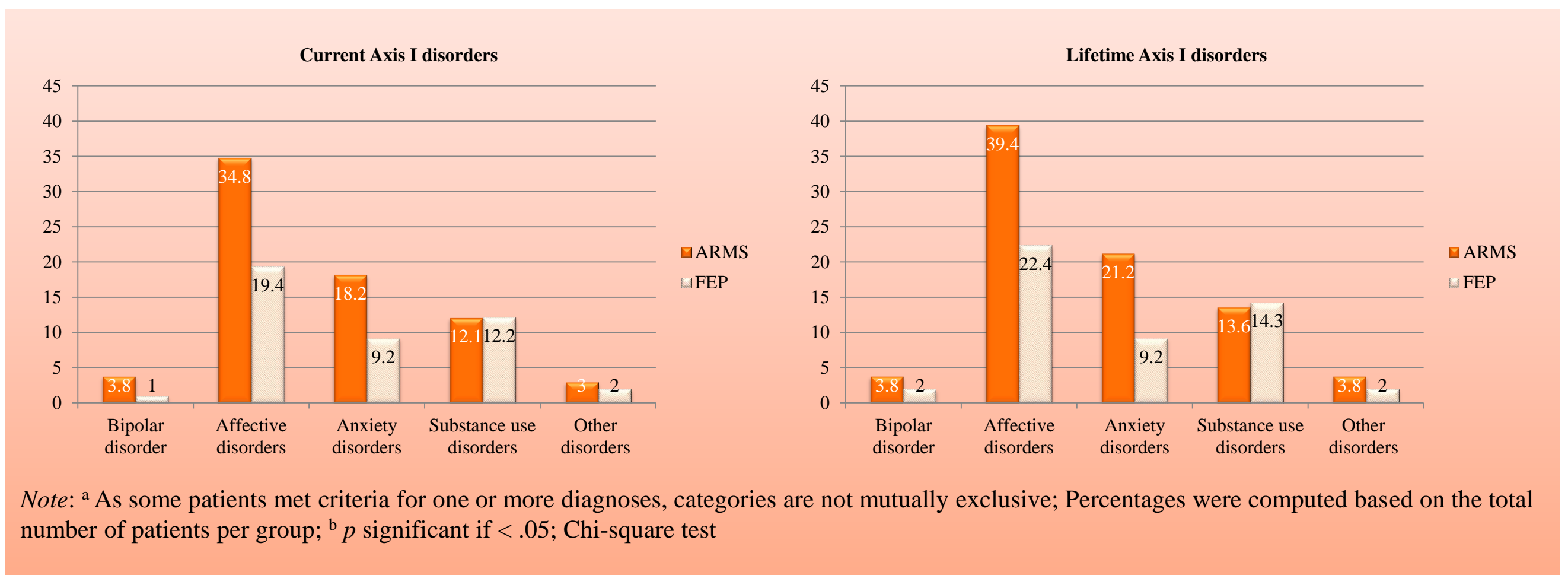
132 ARMS and 98 FEP patients were included. Current comorbidities were present in 53.1% of FEP and 64.4% of ARMS patients, the most common being affective, anxiety and substance use disorders. Current affective disorders were significantly more common in ARMS than FEP.

Male FEP patients had more current ( $p=.008$ ) substance use disorders (across all substances) compared to female FEP.

Lifetime axis I disorders were diagnosed in 58.2% of FEP and 69.7% of ARMS patients, with significantly more affective and anxiety disorders in ARMS than FEP.

The following gender differences emerged regarding lifetime Axis I diagnoses: Male FEP patients had more and lifetime ( $p=.004$ ) substance use disorders (across all substances) and cannabis dependence was also more common in men than in women of the FEP group ( $p=.029$ ).

No differences emerged between ARMS-T and ARMS-NT for current and lifetime diagnoses.



## Method

This study was part of the Früherkennung von Psychosen (FePsy) study (2). Patients were assessed using the Basel Screening Instrument for Psychosis (BSIP) (3). The BSIP allows classifying subjects as ARMS patients, FEP patients or not being at risk for psychosis.

Current and lifetime axis I diagnoses were assessed using the Structured Clinical Interview for DSM-IV (SCID-I).

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## Disclosure information

All authors declare not to have any conflicts of interest that might be interpreted as influencing the content of the manuscript.

This study was funded in parts by a grant from the Swiss National Science foundation SNF#320030\_127323

## References

(1) Fusar-Poli, P., Nelson, B., Valmaggia, L., Yung, A. R., & McGuire, P. K. (2014). Comorbid depressive and anxiety disorders in 509 individuals with an at-risk mental state: Impact on psychopathology and transition to psychosis. *Schizophrenia Bulletin*, 40(1), 120–131. doi:10.1093/schbul/sbs136

## Conclusion

As expected ARMS patients have many comorbidities, while FEP have less comorbid Axis I diagnoses. In line with previous research, there were few gender differences in axis I comorbidities (3). Moreover, no differences between ARMS-T and ARMS-NT emerged, suggesting that axis I comorbidities do not improve prediction of transition. Nevertheless, the high comorbidity prevalence is clearly relevant for global functioning and clinical treatment.

(2) Riecher-Rössler, A., Pflueger, M. O., Aston, J., Borgwardt, S. J., Brewer, W. J., Gschwandtner, U., & Stieglitz, R. D. (2009). Efficacy of using cognitive status in predicting psychosis: a 7-year follow-up. *Biol Psychiatry*, 66(11), 1023–1030. doi: S0006-3223(09)00894-4 [pii]

(3) 10.1016/j.biopsycho.2009.07.020 Riecher-Rössler, A., Aston, J., Ventura, J., Merlo, M., Borgwardt, S., Gschwandtner, U., & Stieglitz, R. D. (2008). Das Basel Screening Instrument für Psychosen (BSIP): Entwicklung, Aufbau, Reliabilität und Validität. *Fortschr Neurol Psychiatr*, 76(4), 207–216. doi: 10.1055/s-2008-1038155

(4) Lim, J., Rekhi, G., Rapisarda, A., Lam, M., Kraus, M., Keefe, R. S. E. E., & Lee, J. (2015). Impact of psychiatric comorbidity in individuals at Ultra High Risk of psychosis — Findings from the Longitudinal Youth at Risk Study (LYRIKS). *Schizophrenia Research*, 164(1-3), 8–14. doi:10.1016/j.schres.2015.03.007