### The British Approach to Understanding and Treating Psychosis

Robin M Murray
Professor of Psychiatric Research
Department of Psychosis Studies
Institute of Psychiatry

robin.murray@kcl.ac.uk

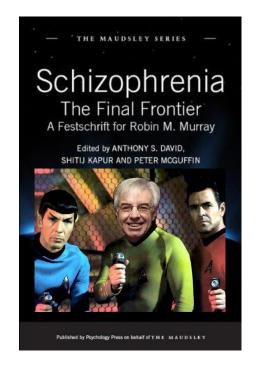
### Which boy will develop schizophrenia?



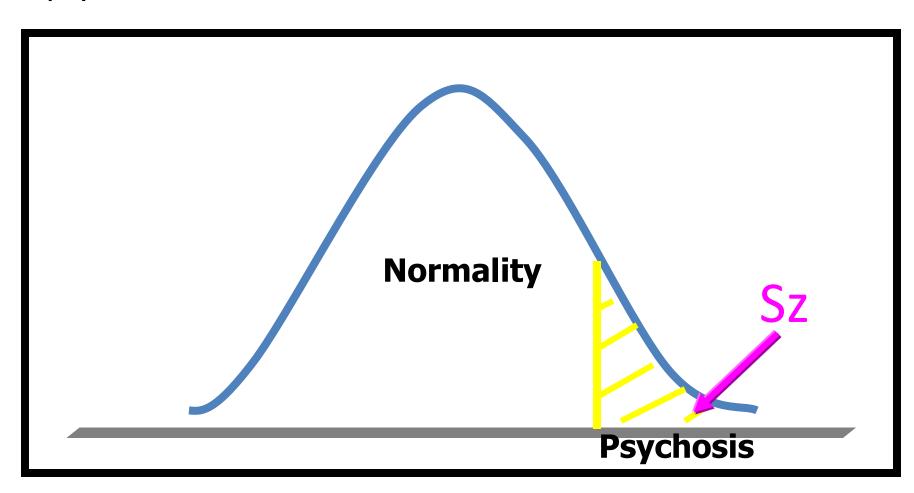








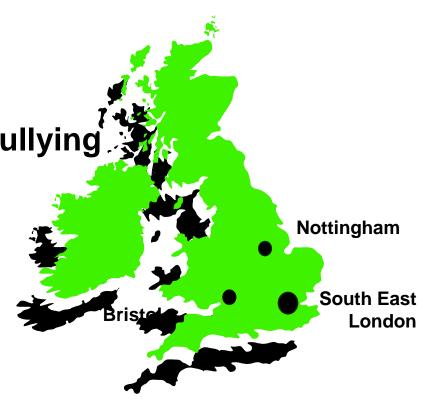
Now we know there are >100 genes, this is not compatible with the idea schizophrenia exists as a discrete entity. It suggests instead that there is a continuum of liability to psychosis



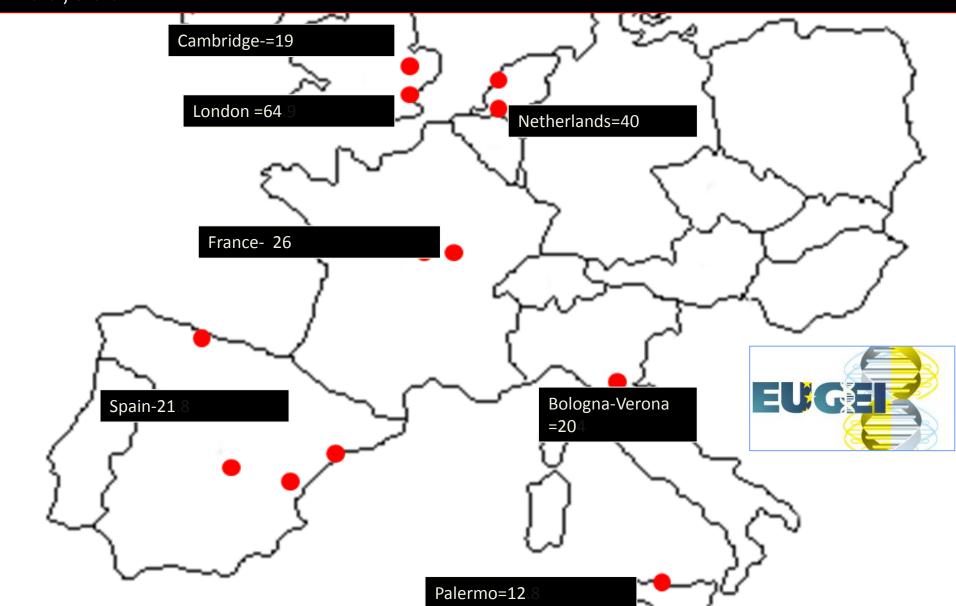
## Environmental Factors that increase the risk of schizophrenia

Childhood Adversity, including bullying Being a migrant/ethnic minority Adverse Life Events Cannabis Use

Living in a City



Incidence of First Episode Psychosis across 16 sites - ranged from 12.0 per 100,000 person years in Palermo to 63.9 per 100,000 in London



Embargo: February 18, 2015, NIHR funding

#### Proportion of patients in south London with first-episode psychosis attributable to use of high potency cannabis: a case-control study

Marta Di Forti, Arianna Marconi, Elena Carra, Sara Fraietta, Antonella Trotta, Matteo Bonomo, Francesca Bianconi, Poonam Gardner-Sood, Jennifer O'Connor, Manuela Russo, Simona A Stilo, Tiago Reis Margues, Valeria Mondelli, Paola Dazzan, Carmine Pariante, Anthony S David, Fiona Gaughran, Zerrin Atakan, Conrad Iyeqbe, John Powell, Craiq Morgan, Michael Lynskey, Robin M Murray



causing a quarter of CI: confidence interval SVChoSis



Labour may ban private government contracts

> By Ben Riley-Smith Political Correspondent

PRIVATE companies motivated by profit should be stripped of billions of pounds worth of government contracts, Ed Miliband's top policy chief has said.

Jon Cruddas, who is writing Labour's received £10billion of government money to help deliver services in the

His comments undermine the La leadership's attempts to prove it is

## AESOP, Aetiology and Ethnicity in Schizophrenia and Other Psychoses



Psychological Medicine, Page 1 of 14. © Cambridge University Press 2014 doi:10.1017/S0033291714000282

### Reappraising the long-term course and outcome of psychotic disorders: the AESOP-10 study

C. Morgan<sup>1,2</sup>\*, J. Lappin<sup>2,3</sup>, M. Heslin<sup>4</sup>, K. Donoghue<sup>5</sup>, B. Lomas<sup>6</sup>, U. Reininghaus<sup>1</sup>, A. Onyejiaka<sup>1</sup>, T. Croudace<sup>7</sup>, P. B. Jones<sup>8</sup>, R. M. Murray<sup>2,3</sup>, P. Fearon<sup>9</sup>, G. A. Doody<sup>6</sup> and P. Dazzan<sup>2,3</sup>

# How were 387 patients functioning at ten years?

- 65% had no psychotic symptoms at 10 years
- 46% had had none for >2 years (40% of those with a diagnosis of Schizophrenia)

21% overall and 19% of people with schizophrenia had no psychotic symptoms and were not taking antipsychotics

#### Schizophrenia Bulletin Advance Access published December 7, 2012

Schizophrenia Bulletin doi:10.1093/schbul/sbs135

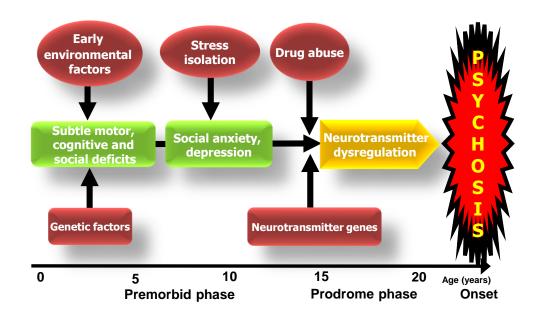
#### The Myth of Schizophrenia as a Progressive Brain Disease

Robert B. Zipursky\*,1, Thomas J. Reilly2, Robin M. Murray2

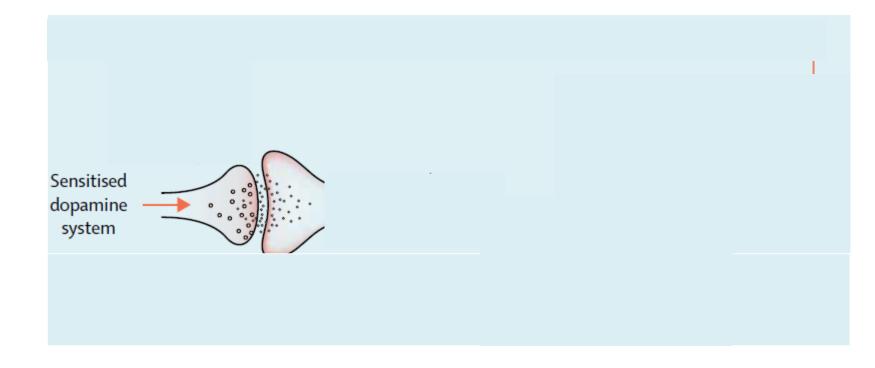
<sup>1</sup>Department of Psychiatry and Behavioural Neurosciences, McMaster University, Hamilton, Ontario, Canada; <sup>2</sup>Department of Psychosis Studies, Institute of Psychiatry, Kings College, De Crespigny Park, London, UK

- 1. Clinical outcome is better than we think
- 2. There is no evidence of intrinsic progressive brain changes
- 3. There is no evidence of progressive cognitive changes

## What events precede psychosis?



# An Integrated Model of Schizophrenia



Howes & Murray Schizophrenia: an integrated sociodevelopmental-cognitive model. Lancet ,383, p1677–1687, 10 May 2014

# The UK View of Psychosis and Schizophrenia

- Less wedded to the medical model of schizophrenia as a brain disease
- Regard Psychosis as one end of a continuum of psychosis, and schizophrenia simply as the most severe variety
- More open to the idea that social factors play a major causal role
- Patients and their families have to be involved in development of services

## Main characteristics of UK mental health care

- Each geographic area is served by a "catchment area" service
- Average length of a hospital admission is about 28 days
- Within each service, the local mental health team has a responsibility for the psychotic patient until he/she is handed to another service e.g. family doctor/specialist service
- Patient must have a care plan on discharge including place to live and follow-up care

# Advantages and disadvantages of a socialist system

- It is "free"
- National standards can be set (though not always met)
- Evidence-based treatments are prioritised
- Funding is dependent on Government Policy UK spends about 9% of GNP on Health Care, same as in main European countries

#### THE ABANDONED ILLNESS

A report by the Schizophrenia Commission











### What do people appreciate?

- 1. Kindness and competence
- 2. Continuity of care.
- 3. Home Treatment
- 4. Early Intervention.

### Most helpful people

- Community nurses 25%
- Psychiatrists 18%
- Social workers 17%
- Psychologists 12%

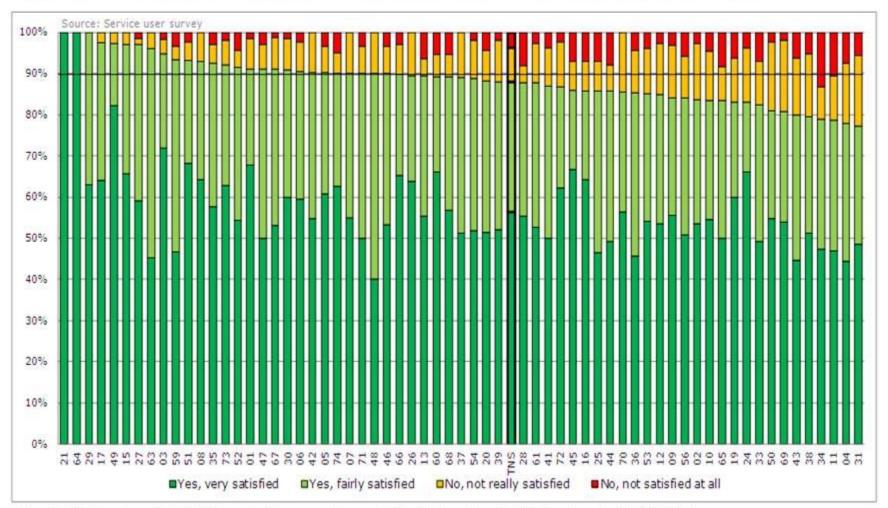
### Most helpful treatments

- Medication 73%
- CBT 40%
- Peer support 30%

## Patient satisfaction with care received



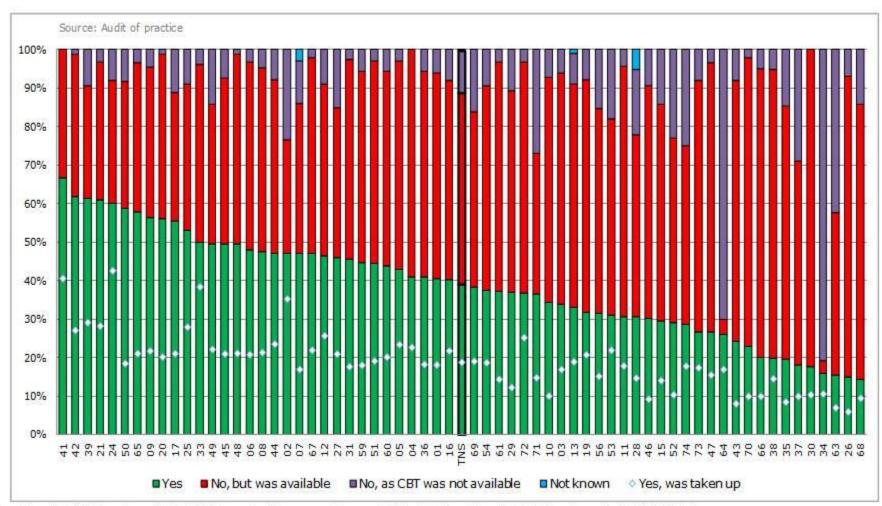
Proportion reporting that they were satisfied with the care they received over the last 12 months



### Psychological therapies: Cognitive behavioural therapy (CBT)



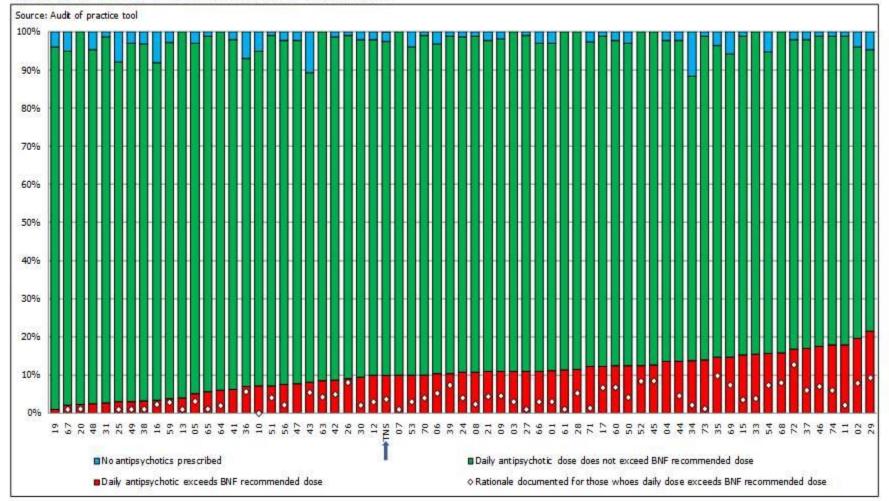
#### Has CBT ever been offered?



#### Prescribing (Standard 9): Prescribing within RC BNF recommended maximum doses



Percentage of service users across Trusts whose total daily dose of antipsychotic medication exceeds the BNF recommended maximum

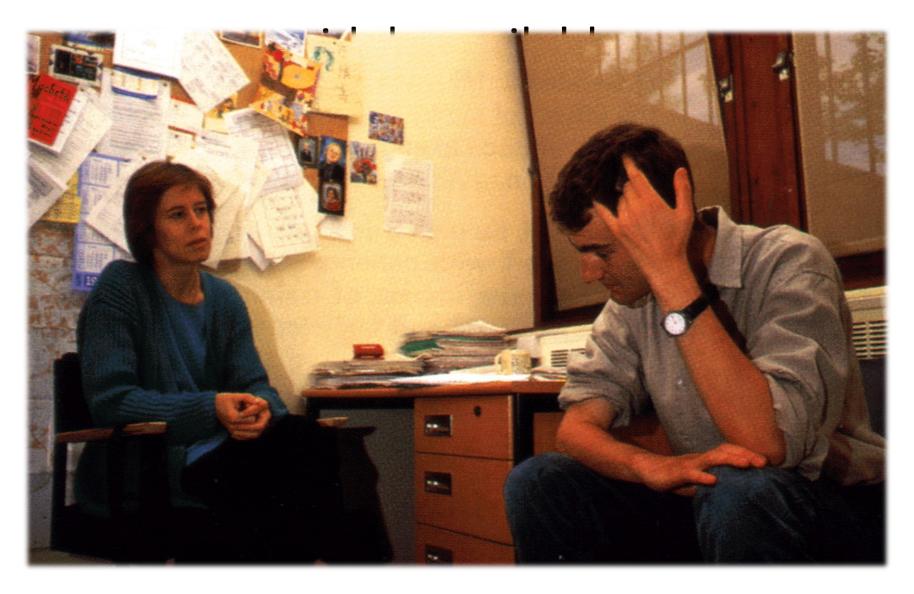


#### Early Intervention for psychosis (2001)

- Provide treatment for the first 3 years after onset
- All services must provide this
- Two main components
  - Early detection
  - Integrated psychosocial treatment

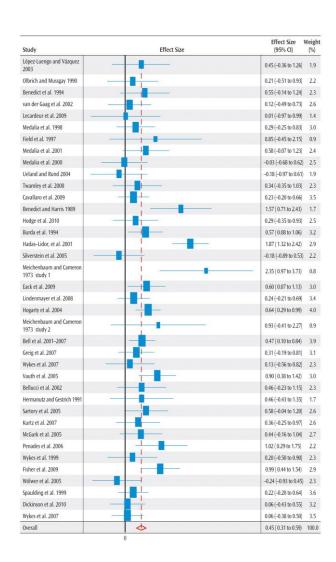
- Evidence for benefit of the assertive follow-up component of EIS on outcome (relapse) is clear with two high quality RCTs
- But benefits not sustained at 5 years possibly because by then pts transferred to standard care

# Psychological treatments should be much more



#### Cognitive remediation treatment (CRT)

- Many studies show that CR has a beneficial effect on cognition
- It also improves
   occupational function and
   this is a durable effect
   (effect on symptoms is not)
- Not yet widely available

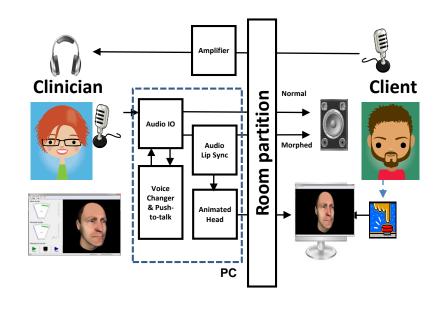


#### **AVATAR Therapy: AVATAR**

AVATAR

(Leff et al 2013)

- Empty chair replaced by computer simulation (avatar).
- The avatar is constructed to look like and sound like what the patient reports experiencing.
- Clinician speaks as himself or through voice transforming software as the 'voice'
- Therapy ingredients: exposuredesensitisation, increase sense of power and control over the voice, coping and other distress management techniques
- 7 x 45 min sessions



MP3 recording to take home

#### Does it work?

- Leff et al 2013
- Pilot RCT (n=24) Compare therapy with waiting list control
- 3 patients stop hearing voices altogether
- Significant reductions in other measures
- Small study, inactive control, large drop out

- Craig et al ongoing
- RCT (n=150) compare avatar to supportive counselling control for attention/time
- Trial complete, awaiting outcome data
- >80% complete therapy
- > 80% complete end of therapy outcomes (blinded)
- Outcome results including 6/12 follow up expected September 2016



## Schizophrenia Commission pointed out that people with schizophrenia die 15 to 20 years early<sup>1</sup>

- Obesity, diabetes, heart attacks, strokes
- Most patients haven't had a physical health check in the last year
- Whose responsibility is it?
  - Officially GPs, but many don't like treating schizophrenic patients
- Most psychiatrists turn a blind eye to their patients smoking cigarettes

## Monitoring of cardiometabolic health risk factors



Percentage of service users who had monitoring of each of the six individual cardiometabolic health risk factors and the percentage who had all six monitored, once in the past 12 months

