

Synopsis for EU-GEI WP5 Publication

Synopsis no.: S5.15
Preliminary title: IMPACT OF COMORBID DISORDERS ON BASELINE PRESENTATION AND LONGITUDINAL OUTCOMES IN SUBJECTS AT HIGH CLINICAL RISK FOR PSYCHOSIS
Contact info for the person(s) proposing the synopsis Name: Paolo Fusar-Poli Partner no: 02 (Institute of Psychiatry) e-mail address: paolo.fusar-poli@kcl.ac.uk
Publication category: 3 Publications from a single work package involving only some parties (or in some cases only one party) in the Work Package
Working and writing group: Paolo Fusar-Poli, Lucia Valmaggia, Matthew Kempton, Philip McGuire and other members of WP5 as appropriate
Work Packages involved: WP5
EU-GEI Partners involved from whom candidate co-authors (<i>additional to working and writing group</i>) should be nominated: NA
Objectives (scientific background, hypothesis, methods, and expected results): The majority of people at ultra-high risk (HR) for psychosis also present with comorbid affective disorders such as depression or anxiety. The impact of HR comorbidity on baseline clinical presentation and longitudinal outcomes is unknown. We would like to investigate the cross sectional impact of baseline comorbid disorders on HR symptoms presentation and on sociodemographic HR characteristics. We will also test the impact of comorbid disorders on longitudinal clinical outcomes: HR symptoms, treatments received, transition, remission, functional status, any use of mental health service. This study will clarify the clinical characteristics of a specific HR endophenotype.
Data needed for the study: (please list the EU-GEI WP5 instruments) Predictor: -baseline comorbid disorders Outcomes -baseline sociodemographic features and symptoms presentation -longitudinal treatments received during follow-up time -longitudinal symptoms -longitudinal transition, remission, functional status, any use of mental health service (number hospital admission, days in hospital)
Plan for statistical analysis (overall strategy): The association between comorbid disorders and clinical/functional data will be assessed with regression analyses. Additionally, we will use an automated-based classification system to stratify HR subgroups (with or without comorbid disorders).
Other analyses/methods: none
Involvement of external Parties (non EU-GEI): none
IPR check (Intellectual property rights): N/A
Timeframe: Once data is received it is expected that data checking and cleaning will take approximately 1 month, analysis will take approximately 3 months and drafting of the paper will take 2 months.
Additional comments: N/A