Understanding causes of and developing effective interventions for schizophrenia and other psychoses

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Plain English summary

Causes of, and interventions for, psychoses

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Plain English summary

We studied first-episode psychotic disorders and at-risk mental states, also called high-risk mental states, which, when we began the programme, were considered precursors of psychotic illnesses.

We developed an enhanced new way to work with general practices and sixth-form colleges (the intervention) to help them identify and refer young people at high risk of developing psychosis. We then did an experiment, the Liaison with Education and General practiceS (LEGS) cluster randomised controlled trial, to test whether or not the new method led to more people at high risk being referred by general practitioners (GPs) to our early-intervention service called CAMEO. The intervention doubled GPs' identification and referral of young people with high-risk mental states as well as those with first-episode psychosis and other mental health problems. Economic modelling demonstrated that this way of working with GPs was economically beneficial for the NHS by reducing the costs of unrecognised mental illness. A parallel trial in sixth-form colleges is yet to report.

We followed 60 young people at high risk for 2 years in the Prospective Analysis of At-risk mental states and Transitions into psycHosis (PAATH) study. In only three young people (5%) did their mental state transition into a first-episode psychosis, fewer than initially expected but similar to results emerging from other studies. Most of the people at HR that we followed had significant depression and anxiety and many had suffered childhood trauma. Identifying this means that services can offer appropriate treatment and not just wait and see whether or not such individuals will develop a first-episode psychosis.

We showed that people from black and minority ethnic groups in rural areas as well as in cities have high mental health needs regarding first-episode psychosis. We developed the PsyMaptic tool to predict the numbers of young people who will require early-intervention services around the country.

The results of the LEGS trial and the PsyMaptic tool are now being used by NHS England to guide the allocation of mental health service funding.

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