

Early Intervention for Psychosis

What is Early Intervention?

Early Intervention refers to services provided both before and after the onset of psychosis.

It grew from the recognition that a substantial amount of the disability that often accompanies psychotic illnesses begins prior to the appearance of full psychotic symptoms. The period between ages 15 and 25, which is the peak period for onset of psychotic disorders, is also the time when individuals develop critical life skills, their personal identity and a social network. Early Intervention programs provide services that focus not only on symptoms and cognitive deficits, but more importantly on helping the individual to maintain or restore life role functioning as quickly as possible.

Benefits of Early Intervention:

- The **First Onset** of Psychosis can be prevented or delayed.
- The **Duration of Untreated Psychosis** can be eliminated or shortened if psychosis occurs. *Studies show that the longer the DUP, the stronger the association with: increased levels of psychiatric symptoms over the long term, decreased likelihood of being responsive to medications, decreased life role functioning over the long term, and increased likelihood of being homeless.* Should transition full psychosis occur, *studies have shown up to 80% of individuals can be treated in the community without needing to be hospitalized.* A shorter period of psychosis without treatment lessens the significant fear and suffering individuals and their families too often experience.
- The period before and after the First Onset of Psychosis is a time with a **great potential for change**. The biological, life role functioning and cognitive changes that impact on psychosis are actively developing during this period, and can be influenced. *Studies have shown that level of functioning in the 3 to 5 years after the onset of psychosis is highly predictive of long-term functioning.*
- People receiving Early Intervention services are significantly more likely to **improve life role functioning** compared to people receiving usual treatment. *Studies have specifically identified improvements in: staying in school or at a job, having friends, having satisfactory family relationships*
- Individuals remain more **engaged in services**. *Studies show 50% of individuals receiving their first treatment for psychosis are lost to services within one year.*
- Early Intervention offers a opportunity to teach individuals the skills and strategies necessary to cope with their illness and **move forward with their lives**. *Research shows without Early Intervention 10% of individuals with schizophrenia committed suicide, and 2/3 of those do so within six years of initial diagnosis.*
- **Service cost** for individuals receiving Early Intervention services are less than costs for usual treatment, due to the decrease in use of hospital services. *Studies show that Early Intervention services cost 1/3 to 1/2 as much as usual treatment.*

Terms & Definitions:

Many terms used in the writings on early intervention are used interchangeably, and with multiple meanings. To clarify the terms used in this brochure, the following definitions are presented.

Early Intervention: the initiation of services prior to the traditional First Treatment of Psychosis. Services may begin as early as the At Risk Mental State and may extend through the critical first few years of illness.

At Risk Mental State (ARMS): the period of time during which an individual can be reliably identified as being at increased risk for the onset of psychosis. Fifty to seventy percent of individuals meeting ARMS criteria will develop First Onset of Psychosis within one year. The term At Risk Mental State is preferred over “prodrome,” which implies that the individual will inevitably meet criteria for a psychotic illness

First Onset of Psychosis: the point at which an individual’s symptoms meet the DSM-IV criteria of psychosis. While the majority of initial diagnoses will be schizophrenia and schizoaffective disorder, bipolar disorder and major depression with psychosis will also be included.

First Treatment of Psychosis: the point at which an individual who has experienced the First Onset of Psychosis first receives treatment from a mental health care provider.

Duration of Untreated Psychosis (DUP): the period between the First Onset of Psychosis and the First Treatment of Psychosis. *Studies consistently report a range of between one to three years of Duration of Untreated Psychosis in the United States.*

More Information

Literature Review: A detailed research report is available, which provides an extensive review of worldwide clinical literature on Early Intervention. **To request a copy or to discuss Early Intervention literature and treatment,** please contact Dr. Shelley Levin at Telecare Corporation at 510-337-7950 or slevin@telecarecorp.com. **More information about Early Intervention is also available at www.telecarecorp.com.**