



賽馬會思覺健康計劃
JOCKEY CLUB
EARLY PSYCHOSIS
PROJECT

Latest results from the Jockey Club Early Psychosis (JCEP) Project

*JCEP Early Intervention Treatment
Improves Outcome
In Psychosis Patients:
JCEP Project 6-month early outcome data*

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Caritas - Hong Kong Social Work Services

 香港心理衛生會
The Mental Health Association of Hong Kong

Background

- Psychotic disorders are complex and often result in long-term functional impairments
- Early Intervention (EI) treatment aims to improve outcome by intensive and specialised intervention during early phase of the disorder
- JCEP is the first EI Service for Adult Early Psychosis patient in Hong Kong
- JCEP uniquely incorporates a randomised controlled trial to scientifically evaluate effects of Early Intervention

JCEP Project

- JCEP project funded by HKJCCT launched in 2009
- Pioneer and facilitate development of EI for adult early psychosis patients in Hong Kong
- Promotes public awareness, gatekeeper training (e.g. security guards and teachers)
- Explore adult Early Intervention model and effectiveness
- Over 300 adult early psychosis patients from 11 Hospital Authority clinics territory-wide participating
- One of the largest randomised controlled trials in EI worldwide

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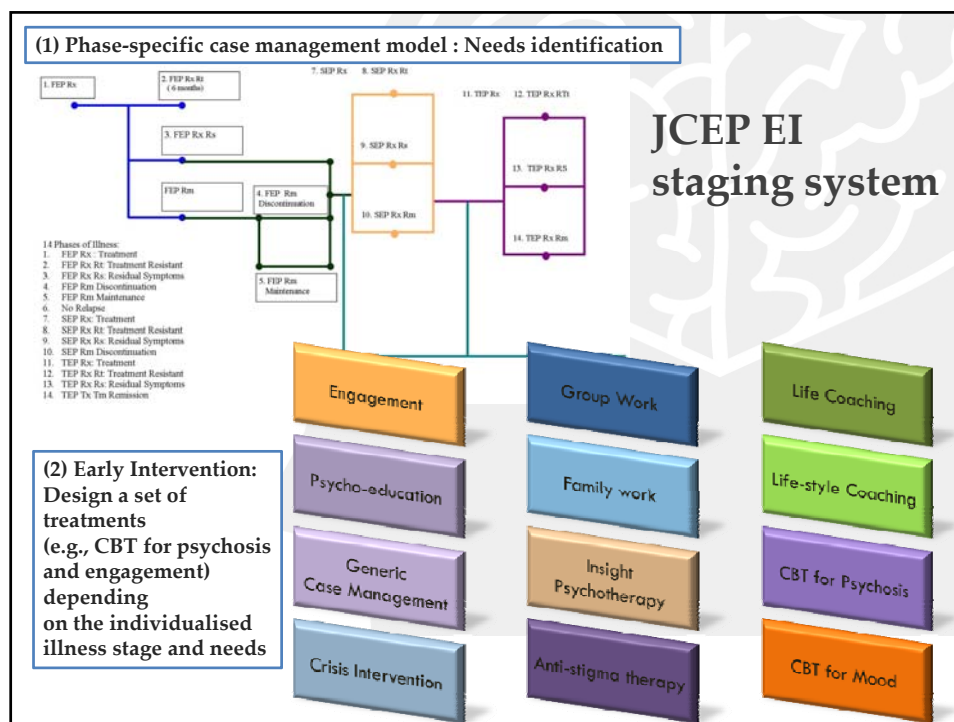
JCEP Early Intervention Treatment

- Patients with first-episode psychosis receiving standard psychiatry service from Hospital Authority
- JCEP provide intensive intervention specifically designed for Adult Early Psychosis

JCEP Intervention Officer

- Psychology and social work background
- Intensive training and specialised knowledge in Early Psychosis
- Intervention guided by in-depth psychological assessments
- Intervention planned prospectively according to patient's illness stage

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JCEP EI staging system (summary)

(1) Needs identification:

- The phase-specific case management model - provides a roadmap of the 14 possible illness stages for psychosis patients
- The model allows JCEP Intervention Officer to map out individual illness course

(2) Intervention:

- Intervention is a set of treatments (e.g., Cognitive Behavioral Therapy for psychosis and engagement) depending on the individualised illness stage and needs

Study Objectives

- Current interim analysis assesses the effectiveness of the JCEP Early Intervention (EI) treatment by comparing the 6-month outcome in patients *with* and *without* the treatment

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Early 6-month Results from JCEP

- Randomised controlled trial design to compare JCEP EI treatment with standard treatment
 - Evaluation at 6 months
 - Outcome: functioning, symptom, cognition
- To date, 318 patients recruited, project will continue follow-up for up to 4 years
- 123 patients completed 6-month assessment

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Study Assessments

- Duration of untreated psychosis (DUP)
 - Delay in receiving effective psychiatric treatment since psychotic symptoms manifestation
- Social and occupational functioning
 - Social & Occupational Functioning Assessment Scale (SOFAS)
 - Role Functioning Scale (RFS), e.g. work productivity, independent living, self care, immediate and extended social network relationships
- Cognition
 - e.g., IQ, attention, visual memory, semantic memory, executive function
- Symptoms
 - Positive (eg, hallucinations, delusions, disorganized thoughts and speech)
 - Negative (eg, poverty of speech and thought, lack of facial expression, lost of interest and motivation, unable to take care of their hygiene, withdraw from social networks)
 - Depressive (e.g., depression, hopelessness, self-depreciation)

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Basic demographics of the patients who completed 6-month assessment

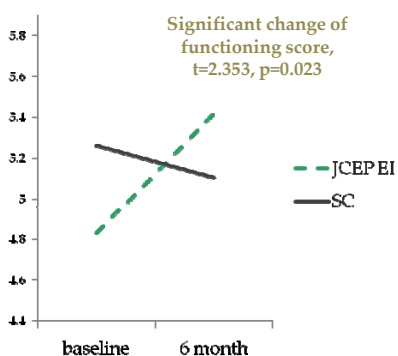
Total number of patients: 123

	JCEP EI treatment (n=84)	Standard treatment (n=39)
	<i>No./mean</i>	<i>No./mean</i>
Male (number, %)	36 (43%)	13 (33%)
Female (number, %)	48 (57%)	26 (67%)
Age (mean)	37.1 years old	39.0 years old
Years of education (mean)	11.6 years	11.0 years
Years in Hong Kong (mean)	32.3 years	33.2 years
Duration of untreated psychosis (DUP) (median)	98 days	92.5 days

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Major findings: 6-month **Role Functioning Scale functioning improvement** in JCEP EI treatment patients with long DUP

Long DUP group (>3 months)



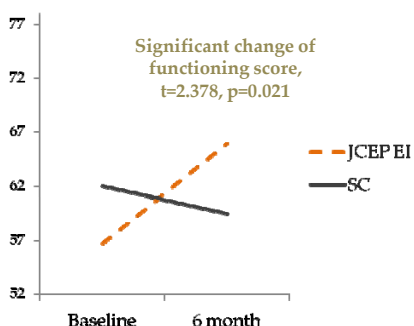
°Role functioning scale measures one's work productivity, independent living, self care, immediate and extended social network relationships; it ranged from 1-severely limited functioning to 7-highly functioning.

°Long DUP patients with JCEP EI treatment showed **significantly more improvement in the RFS overall functioning score from baseline "marginal functioning" to 6-month "moderately functioning"** than long DUP patients without JCEP EI treatment, given the 2 groups have no difference at baseline.

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Major findings: 6-month **SOFAS functioning improvement** in JCEP EI treatment patients with long DUP

Long DUP group (>3 months)

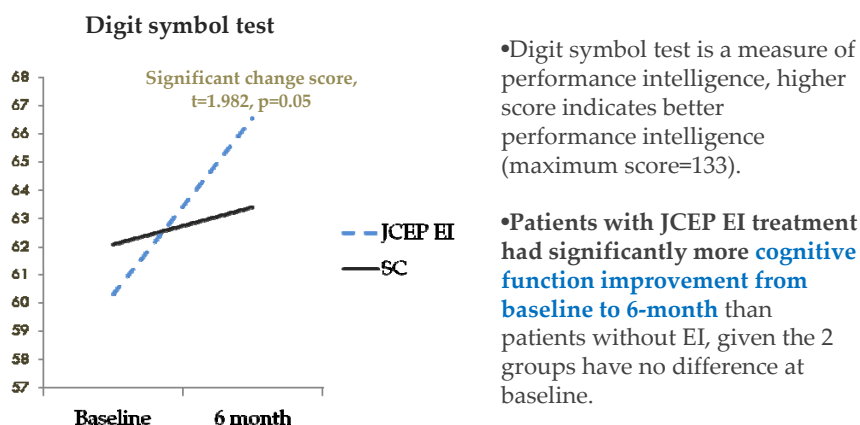


°SOFAS – a measure of one's social and occupational functioning, which ranged from 1 (poorest functioning) to 100 (superior functioning).

°Long DUP patients with JCEP EI showed **significantly more improvement in the SOFAS overall functioning score from baseline "moderate difficulty" to 6-month "some difficulty"** than long DUP patients without EI, given the 2 groups have no difference at baseline.

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Other findings: Patients with JCEP EI treatment have better **cognitive function** at 6-month



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Other findings: better cognitive function is associated with better functioning at 6-month

- Better performance in intelligence at 6-month is *significantly associated with* better overall social and occupational functioning at 6-month
- Statistical analysis result:
 - Digit symbol & SOFAS:
 - correlation coefficient=0.341, $p<0.001$
 - Digit symbol & Role Functioning Scale:
 - correlation coefficient=0.206, $p=0.035$

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Results Summary

- For patients with long treatment delay and poor functioning, JCEP intervention treatment significantly improve functional outcome in 6 months. The performance of these patients in terms of social and occupational functioning goes up to a satisfactory level - from marginally functioning at baseline to moderately functioning at 6-month.
- JCEP intervention also improves cognition, which may in turn lead to better functional outcome
- Longer treatment delay is associated with poorer functioning

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Conclusion

- Important to seek specialised help early
- Specialised Early Intervention can address functional impairments in psychosis, particularly for patients with long DUP
- Impact of JCEP intervention treatment is detectable as early as 6 months
- Important to cognitive function evaluation and remediation
- Intensive and focused Early Intervention should be provided to adult early psychosis patients
- Long term data is needed to evaluate impact over longer period of time
- Fidelity to intervention content, staff quality and service model is required before generalization

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