

AS02-01 - IMPROVING COGNITION AND FUNCTION - STYLE TRUMPS CONTENT

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Introduction: Cognitive difficulties are prevalent in people with a diagnosis of schizophrenia and are associated with poor long term functioning. They interfere with recovery so that people with more severe deficits have difficulty taking advantage of rehabilitation techniques.

Aims/Objectives: Three approaches to improving outcomes are possible: (i) target cognition, (ii) adapt rehabilitation programmes, (iii) adapt the environment. A number of psychological therapies have been developed that target cognition. This symposium will discuss and evaluate the similarities and differences between such therapies.

Method: A review of randomised controlled trials and a new meta-analysis.

Results: The form of therapy targeting cognition might be in groups, individual or computer presentation. They may be based on a clear theory about the deficits in schizophrenia or they may have borrowed from work on brain injury. They can last for a few sessions to two years and use different types of teaching, such as practice or strategic problem solving. Despite all these differences 40 randomised controlled trials have shown that they can produce modest improvements in cognition and a new meta-analysis has shown that there is some homogeneity of effects across different therapies but that methodology does make a difference.

Conclusions: Improvement in functioning is best achieved by combining therapies and by the remediation approach being to teach strategies rather than only practicing skills. Metacognition which is the awareness of thinking skills and when certain strategies should be implemented seems to be the key issue in transferring skills from the cognitive domain to general functioning.