The Effect of Metacognitive Education Treatment on Thought Disorder and Cognitive Impairment in Schizophrenia Patients

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SUBMISSION DETAILS

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Research Type Human Subjects Research

Clinical Trial No

Clinical Relevance No

Content New data is being presented.

Abstract Details In this study, we found no any effectiveness of metacognitive training program for formal thought disorders. However, we found that the metacognitive training program could be an effective program in improving social cognition skills and reducing the level of depression in schizophrenia patients.

Poster or Oral Presentation Poster Only

Background Schizophrenia impairs psychosocial functionality, accompanied by delusions, hallucinations and disorganized behaviors, and impairments in language, thought and affect. Thought disorder includes disorders in the production and organization of thoughts. In recent years, in addition to antipsychotic treatment, various psychotherapies have been applied in schizophrenia to improve these clinical symptoms. Metacognitive treatment program aims to change the cognitive substructure of erroneous and distorted thoughts in patients and make them aware of their own mental processes. The aim of this study was to investigate the effect of Metacognitive Training on thought disorder and cognitive impairment in schizophrenia patients.

Methods In this study, 61 patients diagnosed with schizophrenia according to DSM-V criteria who applied to Dokuz Eylül University school of Medicine, Department of Psychiatry, Schizophrenia and Other Psychotic Disorders Outpatient Unit were included. Twenty-one patients were included into the Metacognitive Training Group (MCT) and 40 patients were in the control group. Metacognitive Training Program was applied for 8 weeks, 1 day a week by face-to-face sessions with the MCT

group patients. Thought disorders were evaluated by the Formal Thought Disorder Scale (FTD) and cognitive tests included the Dokuz Eylül Theory of Mind Scale (DEZİKÖ), Reading the Mind from the Eyes (RMET) test, Digit Span and Category Fluency (CFT) test. Severity of schizophrenia symptoms were evaluated by using PANSS (Positive and Negative Syndrome Scale). Depression level of the patients was measured by the Calgary Schizophrenia Depression Scale. All tests were applied to MCT group and control group at the beginning and at the end of 8 weeks.

Results We found no statistically significant difference between the pre-test and post-test FTD scores of the MCT group and the control group. However, there was a statistically significant difference pre-test and post-test DEZIKÖ scores of MCT group and control group. DEZIKÖ scores of the MCT group significantly increased after the metacognitive therapy compared to control group ($z = -2.317$; $p=.021$). Also, depression scores of the MCT group significantly decreased after metacognitive therapy compared to control group ($t(1,20) = 2.496$; $p=.021$). There were no statistically significant differences between MCT and control groups regarding PANSS positive, PANSS negative, PANSS psychopathology, PANSS total and RMET scores, and the neuropsychological tests Digit Span and CFT scores.

Discussion In this study, we found metacognitive training program could be an effective program to increase social cognition skills in schizophrenia patients. In addition, there was a decrease in the severity of depression in schizophrenia patients who received MCT. First of all, it is thought that not being able to reach the targeted sample in the experimental group in this study had a detrimental effect on the meaningfulness of the data evaluation. Theory of mind skills occupy a large place in MCT. In the MCT program, it was observed that the skills were improved in patients in a manner consistent with the literature due to the fact that the skills were worked with modules in a repetitive manner. Considering this curative effect, it is seen that the skills targeted to be given to patients with MCT overlap with ToM skills.

Keyword

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metacognitive training
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social cognition

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DISCLOSURE

Financial Relationships

Disclosure No, I have nothing to disclose.

Statement 1 I Agree.

Statement 2 I Agree.

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Statement 4 I Agree.

Statement 5 I Agree.

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