

ABSTRACT

The present study aimed to investigate the impact of the Duration of Untreated Psychosis (DUP) on cognition and emotion recognition in patients with First Episode Psychosis (FEP). It was assumed that the length of DUP will affect their performance on the measures of cognitive functioning: Mini Mental Status Examination (Folstein, Folstein, & McHugh, 1975), Spatial Span Subscale of Wechsler Memory Scale-III (Wechsler, 1997) and Urdu version of computerized experimental emotion recognition task: Facially Expressed Emotion Labeling, Test (FEEL) (Kessler, Bayerl, Deighton, & Traue, 2002). Positive correlation between measures of cognitive functioning and emotion recognition was also assumed. A purposive sample of 60 patients, 41 men and 19 women with FEP falling in three diagnostic categories according to DSM-IV-TR (APA, 2000) i.e. Schizophrenia, Schizoaffective and Substance-Induced Psychosis was drawn from different hospitals of Lahore and Faisalabad. Twenty eight patients experienced shorter DUP (less than 80 weeks) and 32 patients had longer DUP (more than 80 weeks). The analysis of data suggested that untreated psychosis comprised some aspects of cognitive function as FEP patients did not significantly differ on cognitive functioning indices across groups by length of DUP except for recall and orientation. Additionally, severity of illness in terms of total score on Positive and Negative Symptom Scale (Kay, Fiszbein, & Opler, 1987), proved to be an important factor effecting cognitive functioning. Patients with FEP with longer DUP showed pronounced deficits in recognition of facial expression of emotions in general and especially for angry, surprised and sad expressions. Moreover, FEP patients showed higher accuracy rates for positive emotion. Length of DUP was positively associated with positive symptoms of psychosis. Negative symptoms significantly predicted performance on Spatial Working Memory Scale. Symptom distribution also differed across diagnostic categories; similarities were found for schizophrenia and schizoaffective groups. Contrary to the postulation of the current study, premorbid adjustment showed poor relationship with DUP and outcome measures except for the late adolescence stage. Finally DUP proved to be a significant predictor of outcome. This study provides support for early detection and intervention strategies.