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RESEARCH ARTICLE

RELATIONSHIP BETWEEN CLINICAL AND THERAPEUTICAL CHARACTERISTICS AND INSIGHT IN SCHIZOPHRENIA

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Abstract

Schizophrenia is a chronic disease which affects 1% of world population and represents a major public health issue. It is often associated with a severe and persistent lack of awareness of the disorder. Our prospective study was carried out at the psychiatric service of Mohammed VI Academic Medical Center in Marrakech on 100 patients hospitalized between August 2012 and February 2013, for schizophrenia diagnosed according to DSM-IV R criteria. The aim of our study was to assess their insight, and identify clinical and therapeutic features associated with this insight. Insight has been assessed by Birchwood insight scale. The bivariate analysis has identified some significant results: poor insight was associated with involuntary commitment status and poor treatment adherence. In conclusion, lack of insight in schizophrenia is an important dimension that can have an impact on the therapeutic alliance, treatment adherence and prognosis.

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Introduction:-

The insight is an Anglo-Saxon term translating the awareness of the disorder, scientific research is more and more leaning has its measurement and its evaluation because of probable correlation between the deficit of the insight and the bad forecast among patients suffering from the psychiatric in order to optimize their assumption of responsibility. The aim of our study was assessing the insight in schizophrenia, and identify therapeutic, and clinical features associated with this insight.

Method:-

Our prospective study was carried out at the psychiatric service of Mohammed VI Academic Medical Center in Marrakech on 100 patients hospitalized between August 2012 and February 2013, for schizophrenia diagnosed according to DSM-IV R criteria. A preestablished hetero-questionnaire with standardized assessment scales enabled us to collect clinical and therapeutic characteristics of each patient. Insight has been assessed by Birchwood insight scale.

Results:-

The average age of our patients was 32 years, male gender was predominant (83%). Paranoid schizophrenia represented the clinical form most frequently met (69% of the population), followed by the schizo-emotional form. 82% of the patients presented a delirious with an hallucinatory mechanism, 58% presented hallucinations. These last

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were primarily auditory 86% of the cases, (n=50) and visual 64% of the cases (n= 37). The use of the NLC was noted in 80% of the cases and that of the NLA in 24% of the cases. (28%) of our sample had irregular observance of their treatment. 91% of the patients were not aware of the symptoms of the disease with an average total score of the PANSS of $83,09 \pm 23,032$, Environ 80% of the subjects of our population (n=78) was not aware of the need for treatment and approximately 86% (n=67) had a bad compliance with the treatment This result was statistically very significant ($p=0,002$).

Conclusion:-

deficit of insight in schizophrenia is an important dimension that can be influenced by various factors, and having an impact on the therapeutic alliance, treatment adherence and prognosis. We suggest further studies, according to the original design, on homogeneous patients samples, with suitable measures of insight, for better identification of factors associated with awareness of the disorder, and better global management of the disease.

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