Article: 1576

Topic: EPV26 - e-Poster 26: Psychopathology

Treatment of Social Cognitive Dysfunctions in Neuropsychiatric Patients with Intellectual Disabilities: a Systematic Review

J. Egger¹, R. Roelofs¹, R. Kessels², E. Wingbermühle¹

¹Centre of Excellence for Neuropsychiatry, Vincent van Gogh Institute, Venray, Netherlands; ²Donders Institute for Brain Cognition and Behaviour, Radboud University Nijmegen, Nijmegen, Netherlands

Introduction

Social cognitive impairments are intrinsically related to symptoms of neuropsychiatric disorders and to inadequate social interaction. Consequently, daily functioning and quality of life is strongly impeded. Several social cognitive training programs have been developed, but for patients with mild intellectual disabilities and/or genetic syndromes, however, treatment options are rarely available.

Objectives

Development of a high quality, evidence-based intervention for the enhancement of social cognition in patients with combined genetic and neuropsychiatric disorders.

Aims

The aim of the current investigation is to identify and review relevant intervention studies, and to pinpoint effective elements of treatment.

Methods

An extensive literature search was performed (PubMed, PsycINFO and WebOfKnowledge databases) and articles were selected and scrutinized according to the PRISMA guidelines.

Results

Out of 341 relevant records, 58 full-text articles were finally assessed of which only 26 met the inclusion criteria. Social cognitive interventions were predominantly developed for people with psychotic disorders (n=21), and incidentally for autism spectrum disorders, anxiety and mood disorders. Studies provided evidence for effectiveness of the concerning intervention, in terms of improvement in either (social) cognitive functioning, or on behavioural outcome measures. Regarding broad-based and multiple interventions, most studies did not provide information on the differential effectiveness of the treatment components.

Conclusions

Social cognitive treatment in neuropsychiatric patients with intellectual disability may profit from the inclusion of low level behavioural training programs targeted at basic perspective taking. Future evaluation studies should specify and test the constituents of a training program more explicitly and should include long term follow-up.