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Schizoaffective Disorder : Evolution of the Concept

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Background: Schizoaffective disorder (SAD) is one of the most challenging concepts with unclear boundaries and remains difficult for clinicians due to its instability over time.

Objectives: we aimed to set the socio demographic and clinical profile of patients treated for SAD and to identify factors influencing the change in the diagnosis from SAD to another mental illness.

Methods: we have analyzed 50 patients followed for at least 10 years and diagnosed as SAD on the basis of DSM-IV criteria.

Results: The first SAD crisis was severe in 40,8% of cases. Almost half of the patients had a pre morbid personality (48%). At the first hospitalization, diagnoses were as follow: in 32% of cases: Schizophrenia, in 28% of cases: SAD, in 26% of cases: a mood disorder. The schizoaffective disorder diagnosis was rectified in 2 cases. More than 4 years are required to change the diagnosis. A complete remission was observed in 40% of cases during intervals, as the evolution of SAD is cyclical. The prognosis was considered good in the majority of cases. The change of the diagnosis is correlated to the age of the onset of the disorder ($p = 0,046$), the quality of intervals ($p = 0,01$), the quality of the professional insertion ($p = 0,018$) and the prognosis ($p = 0,003$).

Conclusion: The heterogeneity of patients with schizoaffective disorder and the absence of operational criteria in the definition of the pathology lead to the incapacity to set SAD clear diagnostic criteria.