



Key Findings in Early Psychosis Knowledge Sharing Initiative

Presentation for Stakeholder meetings

Key Findings in Early Psychosis Knowledge Sharing Initiative Nova Scotia Early Psychosis Network





Knowledge Sharing Initiative

- Goal: make key findings about care and support of people in early psychosis widely available.
- Carried out by the Nova Scotia Early Psychosis Network
- Supported by funding from the Nova Scotia Health Research Foundation
- Includes email updates, online webinars, website articles, regional stakeholder meetings
- Steering group: Phil Tibbo, Sabina Abidi, Donna Methot, Stephen Ayer, Laura Burke, David Whitehorn.

The Field of Early Psychosis

- Developed over the past 25 years.
- Research and clinical service development focused on the time before and shortly after the emergence of psychosis.
- International association and conferences.
- Nova Scotia Early Psychosis Program began 1996.
- 2004 Nova Scotia adopted service standards for Early Psychosis and created the NS Early Psychosis Network.

What is Psychosis?

- Hallucinations, delusions, disorganized thinking.
- Can be secondary symptom in many conditions.
- Early Psychosis focuses on conditions in which psychosis appears to be the primary symptom.
- May also involve 'negative symptoms' such as reduced emotion or motivation.
- There may also be cognitive deficits involving memory, attention or problem solving.
- Several diagnostic categories, including Schizophrenia.

Four Key Findings

- 1. Psychosis occurs in clinical stages, including an at risk stage.
- 2. Early detection and optimal stage-specific treatment results in better outcomes.
- 3. Family education and engagement are an essential component of optimal treatment.
- 4. Psychosis is not a progressive, degenerative brain disease.