

Oral presentation

Validating the remission concept: can we make it clinically meaningful to the patients and psychiatrists?

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from International Society on Brain and Behaviour: 2nd International Congress on Brain and Behaviour
Thessaloniki, Greece. 17–20 November 2005

Published: 28 February 2006

Annals of General Psychiatry 2006, **5**(Suppl 1):S31 doi:10.1186/1744-859X-5-S1-S31

Remission turned out to be a divider between good of poor outcome in a study where 242 patients with schiz-opsychotic illness were assessed. The study took place at the NU Health Care in the western region of Sweden and in total 284 patients were enrolled in this single centre study of which 242 completed the different tests. The number of patients is more than 50% of all patients in the catchment area who are in a stable condition.

All patients were tested to decide the illness severity, functional and social outcome, cognitive capacity, quality of life, satisfaction of care, insight, family burden, received pharmacological treatment and side-effects. The status of remission was assessed by extracting the eight items from the PANSS (Positive And Negative Syndrome Scale).

In total 38% of the patients has achieved the severity criteria for remission. These patients were superior in both functional and social outcome. They also reported a better quality of life as well as their relatives perceived fewer burdens as a consequence of the illness. They expressed a higher satisfaction with their care and antipsychotic treatment and finally showed a better understanding of their illness. A parallel finding was that patients who had reached remission also had a better cognitive ability.

Our findings suggest that patients in remission has a favorable outcome in such extent that remission must be identified as a primary treatment goal. On the other hand, the likelihood of remission seems to be related to the patient's level of cognitive functioning. This enhances the importance of providing a treatment that allows patients with not so good ability to achieve remission and a better outcome.