



Overview of Early Intervention Services for Schizophrenia

Introduction to Early Intervention for Schizophrenia in CT

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Overview of Early Intervention Services for Schizophrenia

Thursdays 2-3pm EST

Session 1: Introduction (April 27th)

Session 2: Module A - Early Detection (May 4th)

Session 3: Module B: Case Formulation (May 11th)

Session 4 and 5: Module C: Coordinated Specialty Care (CSC) (May 18th & May 25th)

Session 6: Module D: Transitions of Care and Review of Population Health based EIS (June 1st)

Offerings

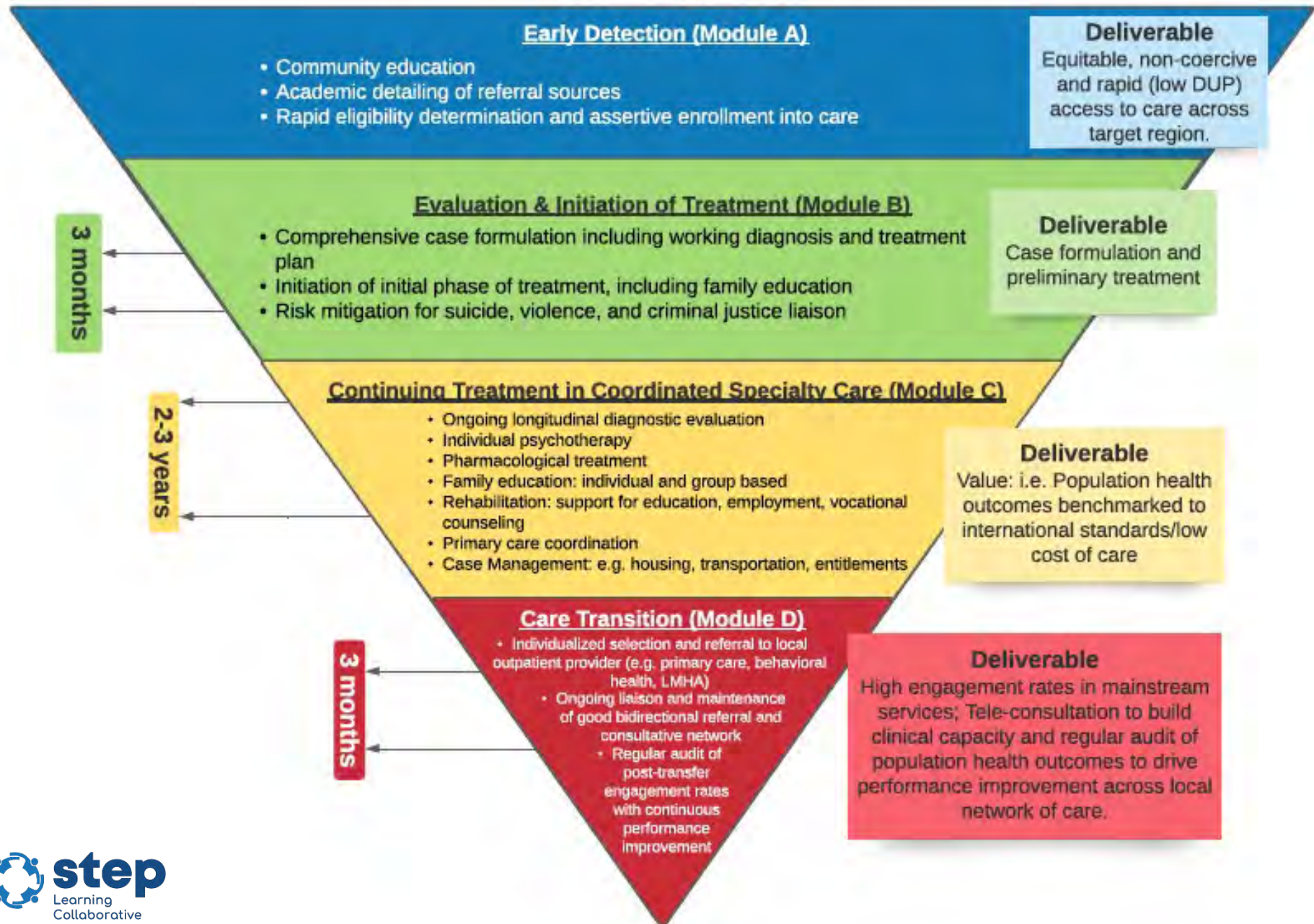


- [STEP Learning Collaborative](#) – workforce development and community education initiative to bolster provider capacity to serve folks experiencing recent onset schizophrenia spectrum disorders across Connecticut
- *for Behavioral Health Providers:*
 - “Overview of EIS for Schizophrenia” Course
 - [Early Psychosis ECHO](#) - Case Discussions and brief didactics
 - [Webinars:](#) e.g.) Early Psychosis Basics, Early Psychosis Treatment Approaches
- *for Community Education:*
 - Family and community workshops
 - Virtual resources– <http://www.ctearlypsychosisnetwork.org>



Early Intervention Service Care Pathway

www.step.yale.edu



Key concepts:

1. Introduction to STEP Learning Collaborative and orient to course and expectations
2. The target illnesses: Schizophrenia or *primary non-affective psychotic disorders*
3. The Critical period hypothesis and Early Intervention Services
4. Evidence for Early Intervention Services, STEP's comprehensive care pathway
5. Addressing unmet need in Connecticut: a statewide Learning Health System

The Schizophrenia(s)



El Loco, Picasso 1909

Syndromes that can (but do not always) include symptoms/signs in 5 clusters:

1. 'Positive' symptoms: 'Psychosis'
 - Reality distortion (delusions, hallucinations)
 - Disorganization (thought, behavior, expression of feeling)

The Schizophrenia(s)

2. 'Negative' symptoms

- lack of motivation (*avolition*)
- reduction in spontaneous speech (*alogia*)
- social withdrawal (*apathy*)

Loss of anticipatory but
not consummatory
pleasure



(Felix Garcia, d. 1941)

3. Cognitive deficits

- Memory (working and long term)
- Attention, processing speed
- Executive functioning
- Social cognition

4 & 5. Affective dysregulation

- Depressive symptoms
- Manic symptoms

Primary Psychotic Disorders

The current *Field-Guide** approach to classification (DSM 5)

Non-affective psychotic disorders

- Schizophrenia
- Schizoaffective disorder
- Schizophreniform disorder
- Delusional disorder
- Brief psychotic disorder/
Schizophreniform disorder
- ~~Psychotic disorder not otherwise specified~~
- Unspecified Schizophrenia Spectrum and Other Psychotic Disorder
- Other specified Schizophrenia Spectrum and Other Psychotic Disorder

The Schizophrenia(s)

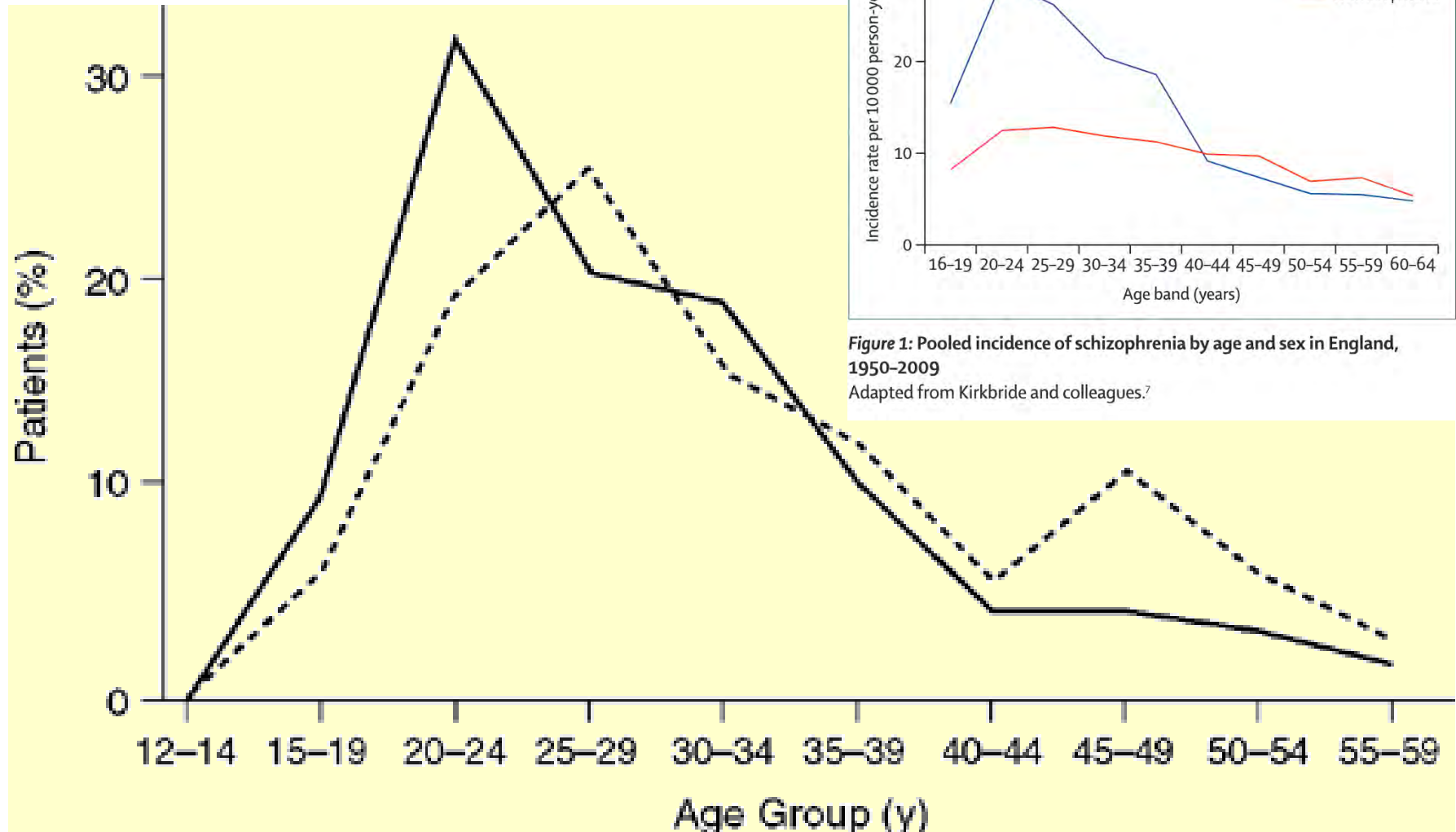
Affective psychoses

- Bipolar disorder with psychotic features
- Major depressive disorder with psychotic features

*Paul McHugh, NEJM 2012

Age at onset of schizophrenia(s)

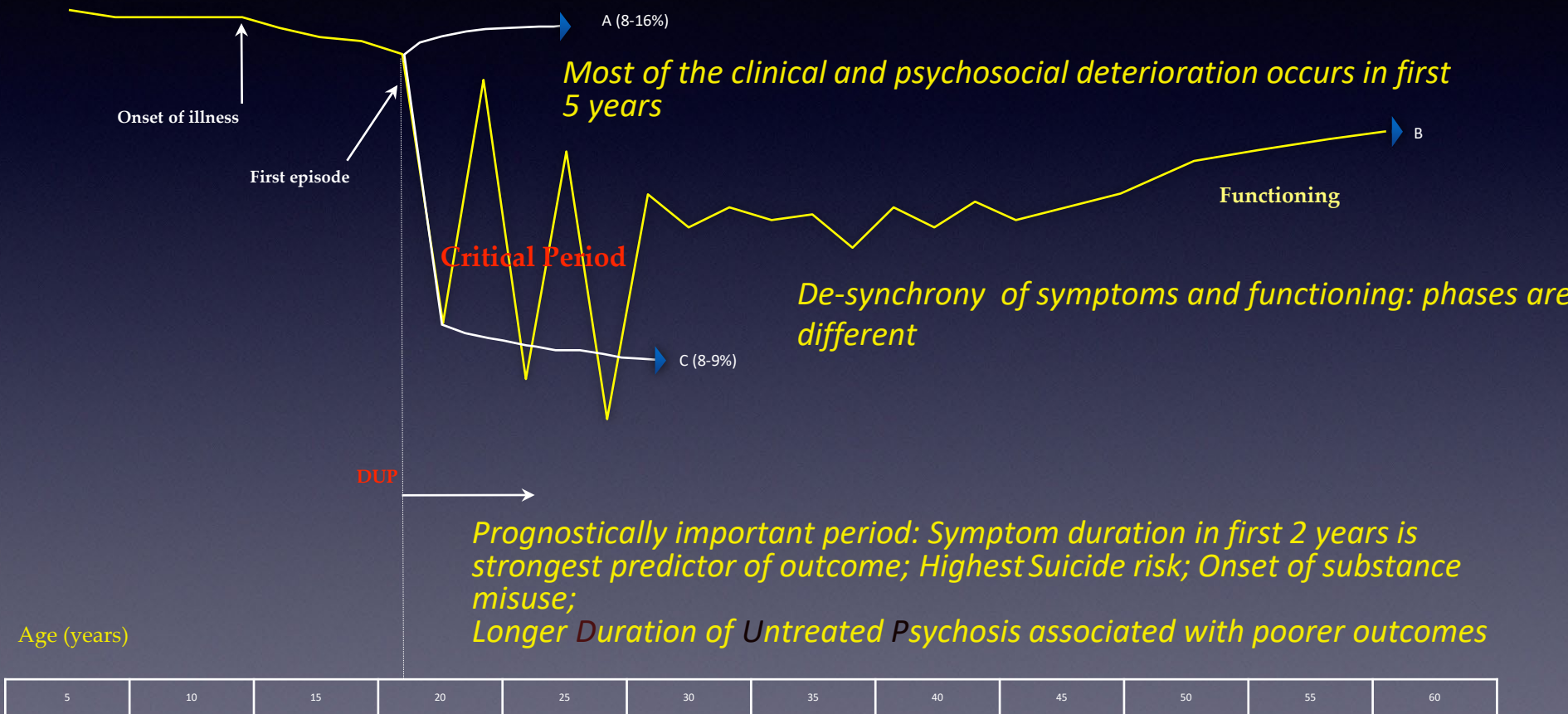
(Hafner, Maurer, Loffler & Reicher-Rossler, 1993)



Schizophrenia(s): The Critical Period & Opportunities for Early Intervention

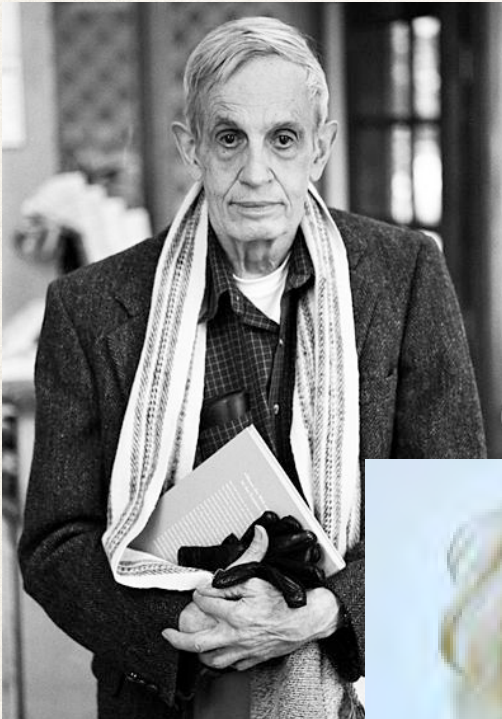
Phase of illness

Premorbid Prodrome Acute Plateau / Chronic



The Schizophrenia(s) Prognostic Heterogeneity

John Nash, 'A Beautiful Mind'



Elyn Saks, 'The Centre Cannot Hold'



Cecilia McGough
CEO & Founder,
**Students With
Schizophrenia**



Felix Garcia

- Less than 1/3 'recover' over 5 years in usual care systems (Menezes, Psychol Medicine '06)
- Costs: ~\$156 billion. Direct* (24%); indirect (76%) ** (Cloutier, J Clin Psychiatry '16)

*mostly (re)hospitalizations; **mostly unemployment, caregiving

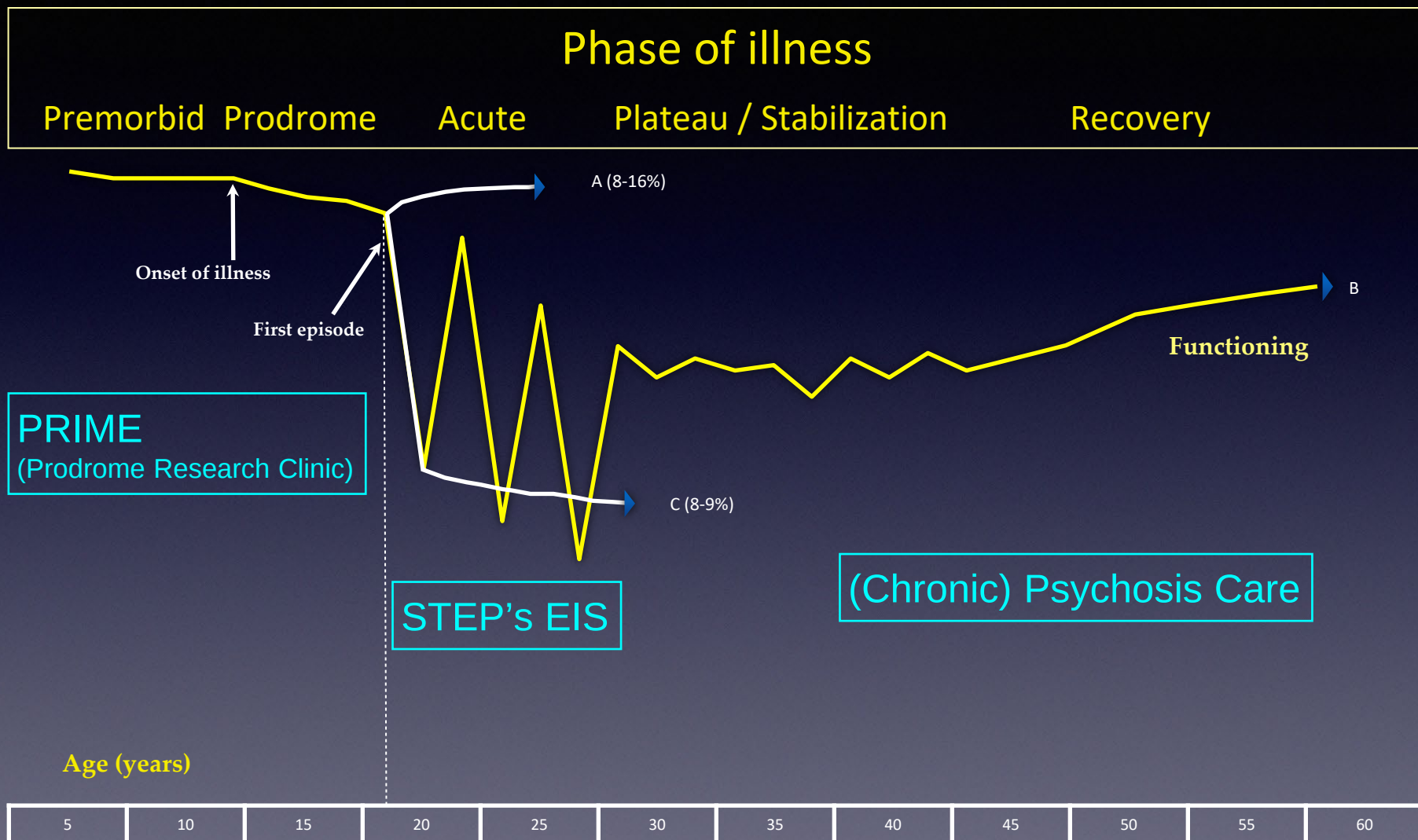
(Affective d/o: \$210.5 billion)

- Schizophrenia spectrum disorders are distressing, disabling and costly under usual care
- These are *chronic illnesses of the young*
- The early illness course reveals many opportunities for early intervention

Early Intervention Services

Rationale and Evidence

Early Intervention (EI): current best practices *in CT*

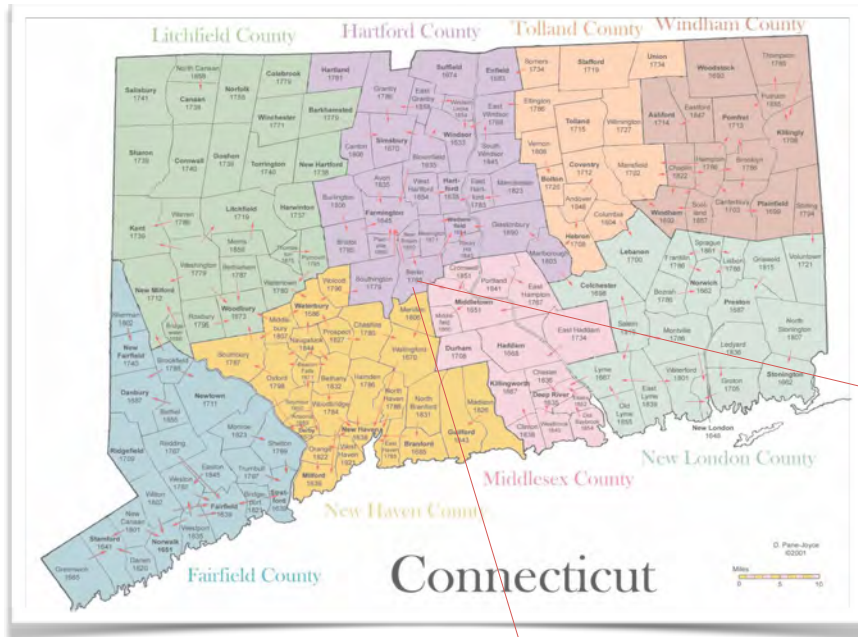


from Srihari et al. Psych Clin of N America, 2012

-
- A. ED:** Intervening earlier (even without enriching care) appears to have durable effects on outcome ([Hegelstad et al, 2012](#))

 - B. FES:** Intervening intensively after the onset of psychosis improves outcomes over usual care (OPUS, Lambeth, STEP and RAISE studies) at 2+ years ([Correll et al., 2018](#))

The Clinic for Specialized Treatment Early in Psychosis (STEP) est. 2006



•Pragmatic RCT (2007-'13)

- Broad recruitment
- Feasible interventions
- Relevant outcomes

•Based in public sector
CMHC: *DMHAS-Yale partnership*

- Addressed barriers to access
 - Insurance status
 - Catchment of residence
 - Adolescent-Adult agencies



The STEP Trial

2007-'13

[ClinicalTrials.gov](https://clinicaltrials.gov) NCT00309452
NIH MH088971-01

Age: 16-45 yo

Duration of illness: ≤ 12 wks lifetime
antipsychotic Rx AND < 5 yrs illness

Exclusion: sub-induced psychotic d/o

Exclusion: DDS (DMR) eligibility

REFERENCE POPULATION
Individuals in early stages of psychotic
illnesses in CT ~ 400 -500/yr

SOURCE POPULATION

STUDY POPULATION

Referrals from ~
-CMHC triage
-Private Hospitals/ERs
-Area Clinics/PRIME
-Colleges



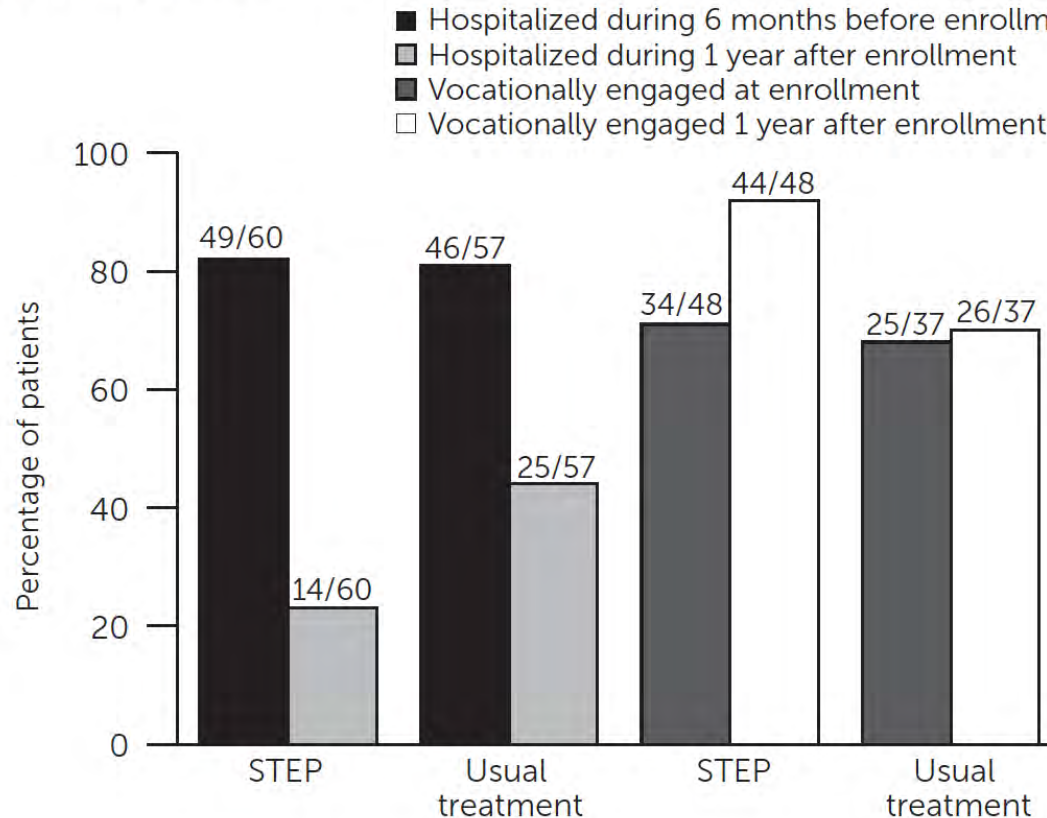
TAU

Referral to private or
public-sector care

STEP Care

Based within CMHC
ambulatory services

FIGURE 1. One-year hospitalization and vocational engagement outcomes among STEP participants and those in usual treatment^a



1. NNT of 5 for Hospitalization over first year
2. Fewer in STEP had 'dropped' out of labor force 8% (vs. 33% in Usual Treatment)

STEP progressively reduced frequency, duration of acute hospitalizations

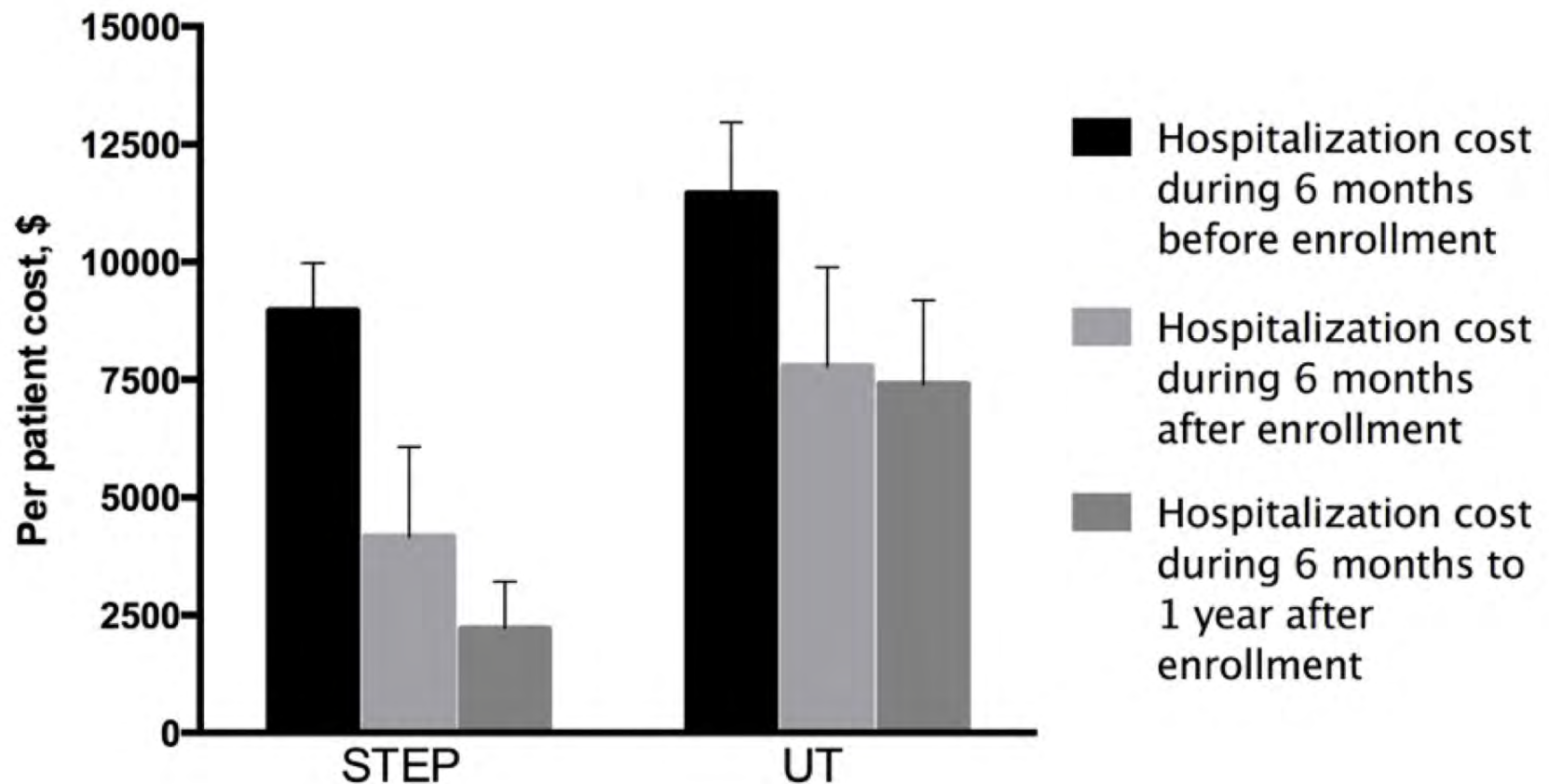
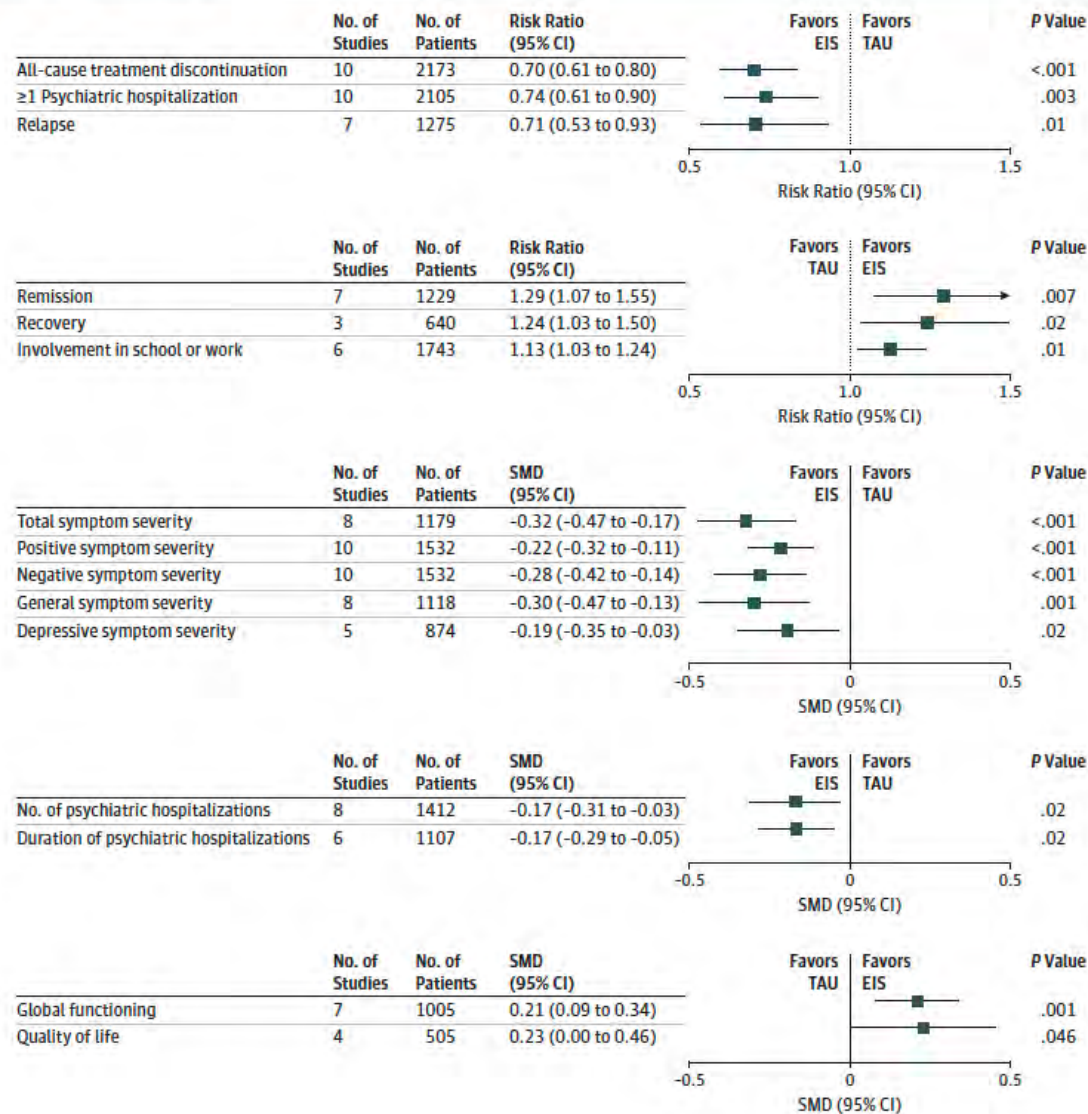
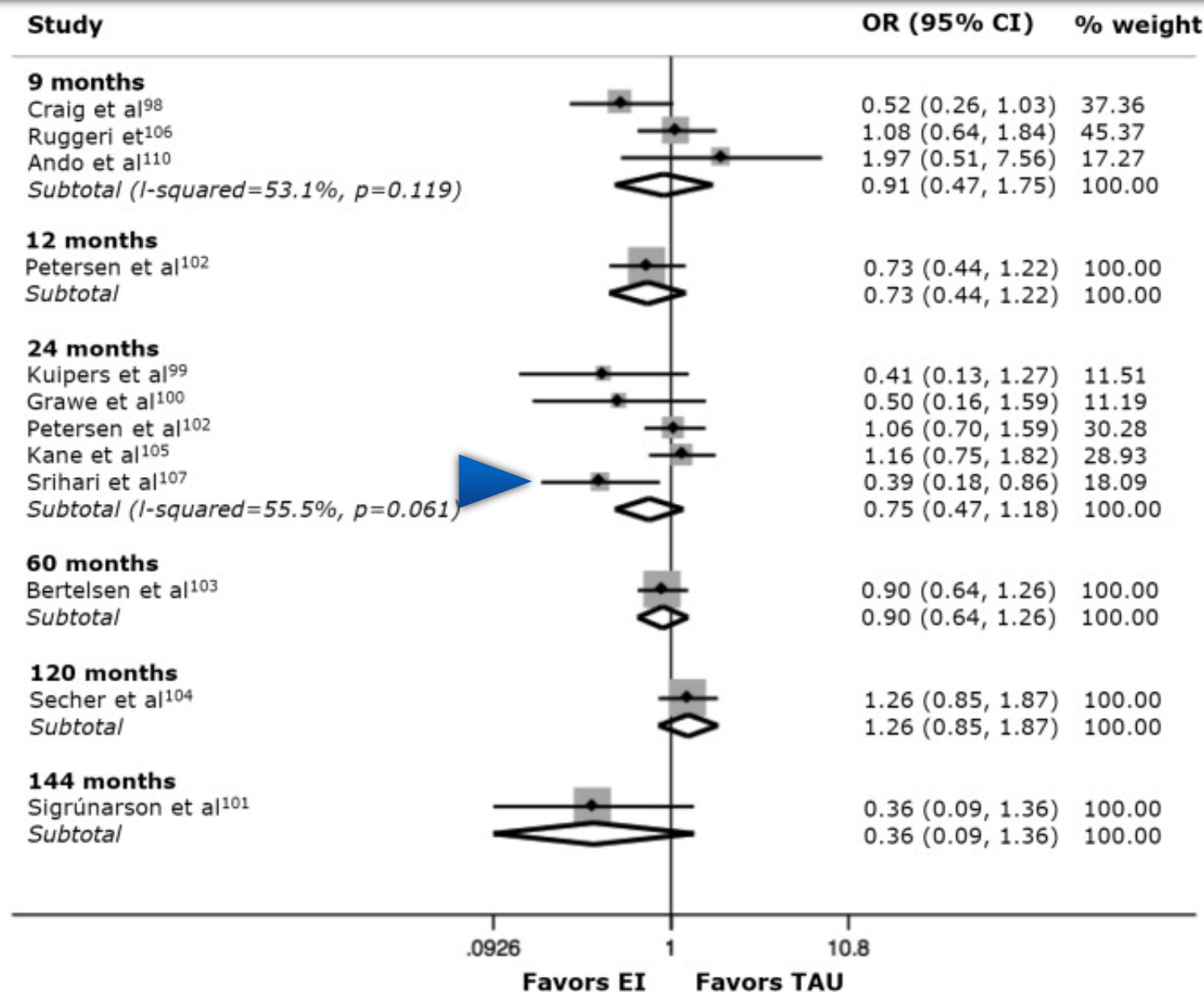


Figure 2. Summary of Pooled Results



Risk of Relapse (Re-admission) for FES vs. Usual Care (TAU): RCTs as of 2017



Evolution of the evidence for FES or Coordinated Specialty Care (CSC) in early psychosis



- Efficacy (**can it work?**) ✓ LEO (U.K.), OPUS (Denmark)
(high intensity ACT level services) 2005
- Effectiveness (**does it work?**) ✓ STEP, RAISE-Navigate
(pragmatic office-based services) 2015
- Costs (**is it worth the cost?**) ✓ STEP, RAISE-Navigate
- Dissemination (**is it scalable?**) ✓ (UK, Denmark);
 - USA: NY, MA, OR, MD, ...

Connecticut: The STEP Learning Collaborative



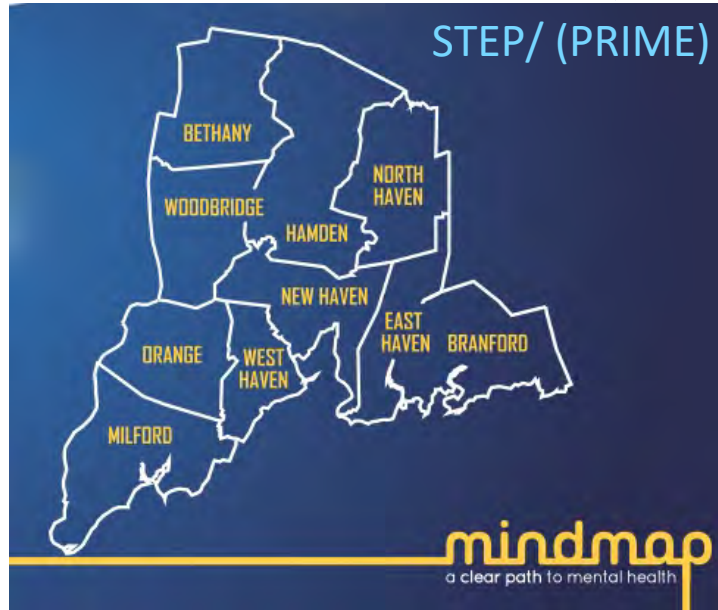
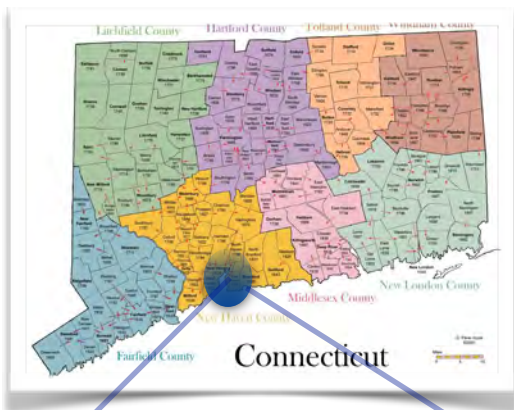
Lt. Murgo, East Haven Police Department

Mindmap

Testing Early Detection
Feb. 2015- Feb. 2019



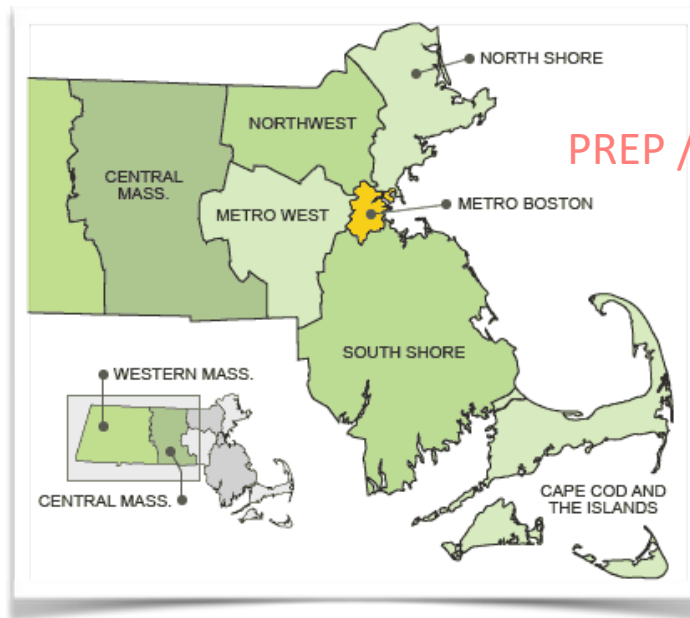
Maria Ferrara, MD: Non-scary Psychiatrist



10 Towns

Population: 408,874

Area: 506 km²



PREP / (CEDAR)²

Metropolitan Boston

Population: 646,000

Area: 232.1 km²

New England's Early Detection initiative
The STEP-ED Study (NIH) 2014-2019
Reducing DUP via media, outreach and performance improvement

Mindmap: 3 interleaved components

1. **Public Education Campaign (Social and Mass Media)**
2. **Professional Outreach & Detailing**
3. **Wait-time reduction**



HOME CONTACT LOCATIONS ABOUT SPONSORS MENTAL HEALTH

mindmap
a clear path to mental health

PSYCHOSIS
AM I LOSING MY MIND?

IF SOMETHING IS WRONG WITH YOUR CHILD
BE THE FIRST TO GET THEM HELP

IF YOUR FRIEND WAS HURTING
YOU'D CALL A DOCTOR

PSYCHOSIS
DON'T LET THE SYMPTOMS SET IN

WHERE

CHECK IN

#mindcheck
quiz here

SHARE

mindmap
a clear path to mental health

PSYCHOSIS HAS MANY SYMPTOMS – MINDMAP OFFERS ONE PATH TO CUSTOMIZED CARE – YOU CHOOSE YOUR STOPS

CONTACT MINDMAP

- Call Anytime or Text 'MINDMAP' to (203) 589-0388
- Calls Returned Within One Business Day

SET UP APPOINTMENT

- Convenient Times Available in the STEP Program

PARTNER WITH A PROFESSIONAL

- Create a Custom Treatment Plan to Suit Your Own Goals

PSYCHOTHERAPY

- Talk with Your Clinician
- Learn to Manage Your Symptoms

MEDICATIONS

- If Needed, Find The Right One At The Right Dose For You

WELLNESS COUNSELING

- Health & Fitness Support
- Substance Abuse Counseling

INDEPENDENT LIVING

- Counseling on Finances, Insurance & Housing

EDUCATION

- Practical Assistance to Help You Balance School, Learning and Treatment

EMPLOYMENT

- Our Employment Specialist Will Help You Find a Job

FAMILY AND FRIENDS

- You Can Choose Who to Involve in Your Care
- 75% of Families Participate in Our Treatment

SOCIAL SKILLS

- How to Build Strong and Healthy Relationships

SUCCESS WITHIN 1 YEAR AT STEP

73%
Have Job or in School

WITH EARLY DETECTION 2x
As Many Recover and are Employed Full-Time

77%
No Hospitalization Required

10x
Better Reduction of Symptoms at STEP vs. Standard Treatment

LOCAL - EFFECTIVE - FREE CALL TODAY (203) 589-0388 www.mindmapct.org

I was only choking a little bit.

It's not a big deal, this happens all the time.

I'm just going to walk this one off.

YOU WOULDN'T IGNORE OTHER PARTS OF THE BODY. DON'T IGNORE YOUR BRAIN.

EARLY DETECTION SAVES MINDS.

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#1

PSYCHOSIS IS THE MOST COMMON BRAIN-BASED ILLNESS FOR AGES 10-24 WORLDWIDE

1-2 YEARS FOR A YOUNG PERSON EXPERIENCING PSYCHOSIS TO GET TREATMENT

\$300 BILLION SPENT ON SERIOUS MENTAL ILLNESSES IN THE USA.

EARLY DETECTION SAVES MINDS.

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PEOPLE WITH PSYCHOSIS ARE 14 X MORE LIKELY TO BE THE VICTIM OF VIOLENCE THAN TO COMMIT IT.

PSYCHOSIS IS NOT PSYCHO

EARLY DETECTION SAVES MINDS.

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NEWS 8
wtnh.com

NEWS ▾ WEATHER ▾ TR



Innovative treatment for young people with psychosis at no cost for two years

By Jocelyn Maminta Medical/Health Reporter
Published: January 4, 2016, 6:49 pm



**FEELING PARANOID?
SEEING OR HEARING THINGS?
HAVING TROUBLE FOCUSING?
LOSING INTEREST IN EVERYTHING?**

**THE SYMPTOMS OF PSYCHOSIS CAN BE SCARY
AT mindmap TREATMENT DOESN'T HAVE TO BE.**

ADAM ON DEALING WITH PSYCHOSIS

“ They helped me understand the illness, medications and the path to recovery. ”

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LOCAL • EFFECTIVE • FREE

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MINDMAPCT.ORG**

**WHAT OUR EXPERIMENT
ON OPTIMISM MIGHT SAY
ABOUT YOUR FUTURE.**

Prudential
Bring Your Challenge

Credit from page 23

Standing on Sacred

chip. The 125 Street of the Harlem Renaissance has diversified, as young whites with deep pockets are pushing the prices of historic brownstones into the seven or eight figure price range. No matter. The place is still sacred ground, and should be recognized as such. It is important to acknowledge these places with names, markers, and monuments, lest we forget. Those who don't know history are doomed to repeat it. We assure that Black Lives Matter because so many black lives were obliterated in Slavery, and because for far too long, it was convenient and comfortable to forget a heinous massacre.

Jillanne Maloney is an author, economist and Founder of Economic Education. Her latest book "Are We Better Off? Race, Obama and Public Policy" is available for pre-order at www.jillannemaloney.com.

Credit from page 20

Beyond the Rhetoric:

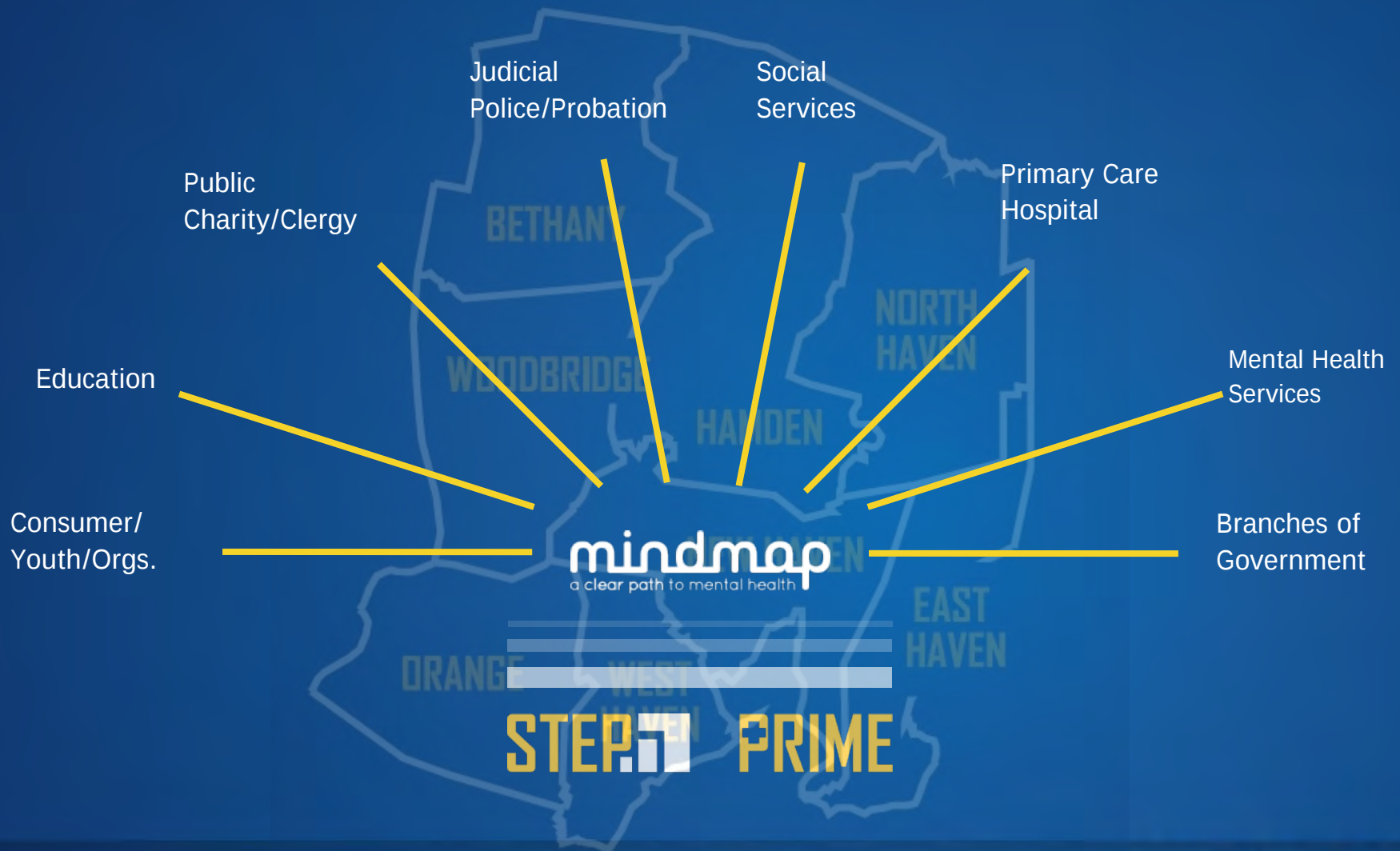
Progressive and Free Market became defining roles. Thus, America and the western world for that matter became divided into two groups, of tribes. We, the NRC, found ourselves classified as Free Market and that was cool to us. The Progressives came up with this project named Barack Hussein Obama. Median name, African blood mixed with Caucasian blood and early roots in Idaho, Indonesia. It was unique to say the least.

So, when the progressive groups like Greenpeace, 1 Percenters, SEIU and other hostile organizations launched a physical attack on the U.S. Chamber of Commerce and its members the format was set. They viewed capitalism as their enemy and a socialist communist ideology as their enemy. The White House was on their side and they would not compromise in the least. The world, as we know it, was about to change. Chaos was in charge!

Mr. Allford is the President/CEO, co-founder of the National Black Chamber of Commerce. For more information about the NRC visit www.nationalbcc.org or email tafford@nationalbcc.org.

Integrating mass & social media: multiple channels with clear call to action

Professional Outreach & Detailing



Public outreach and education



Did 'Early Detection' work?

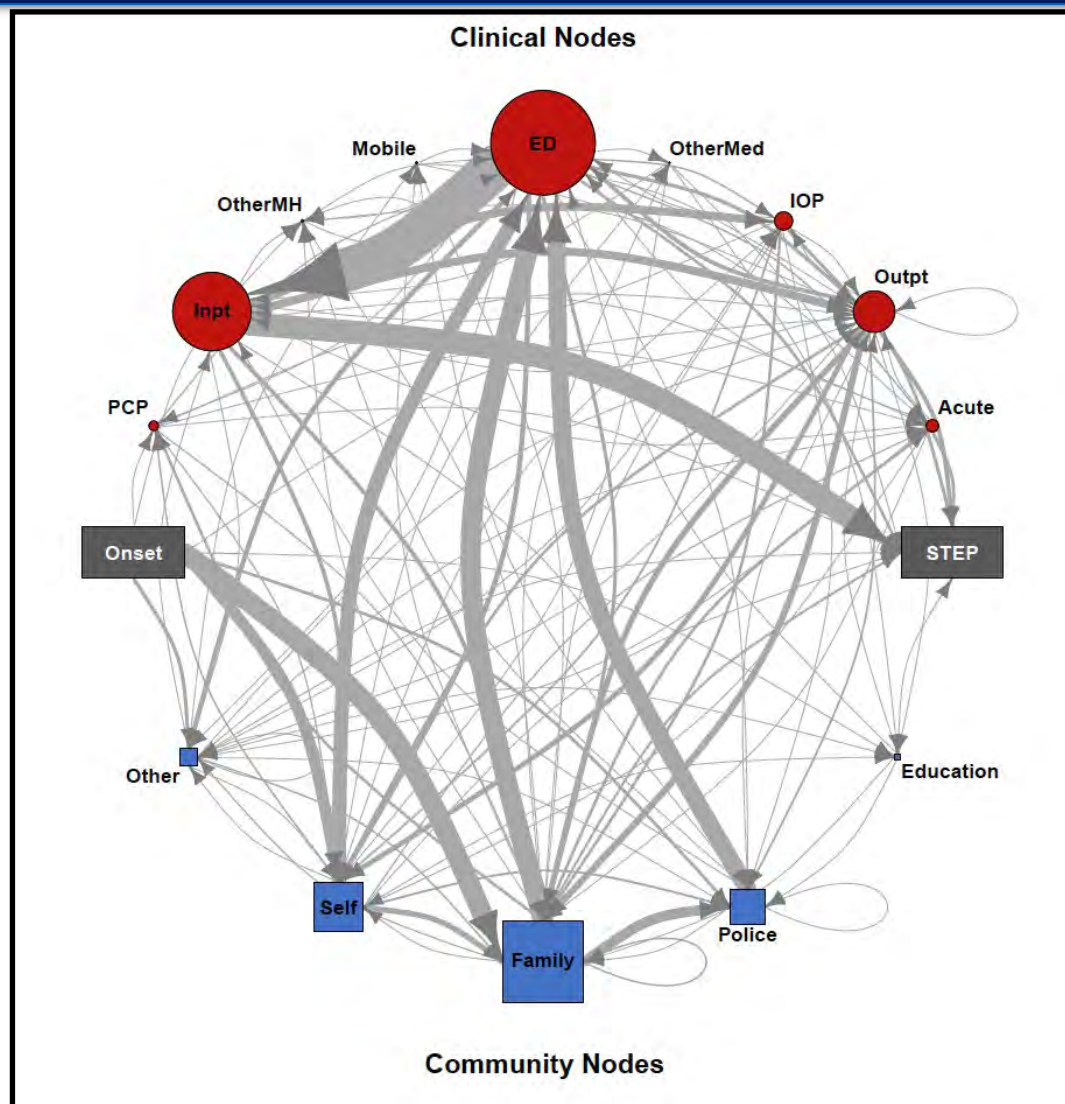
Median Total DUP at STEP

311.5	→	149 <u>Days</u>
44.5	→	21 <u>Weeks</u>
~10	→	~ 5 <u>Months</u>



*Srihari et al., **Early Detection of First-Episode Psychosis in a U.S. community: A Nonrandomized Controlled Trial** (Under review)*

What happens to a person with recent onset psychosis in Greater New Haven? Pathways through the regional Network



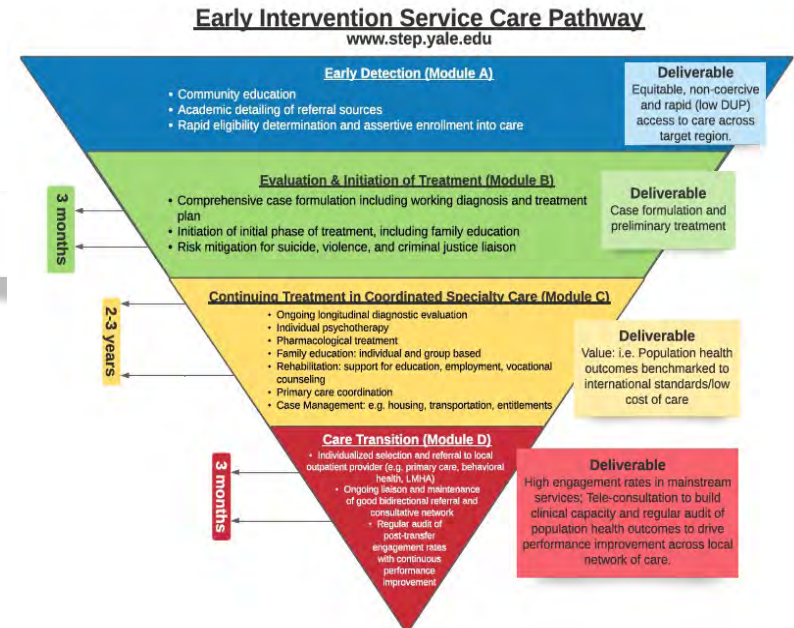
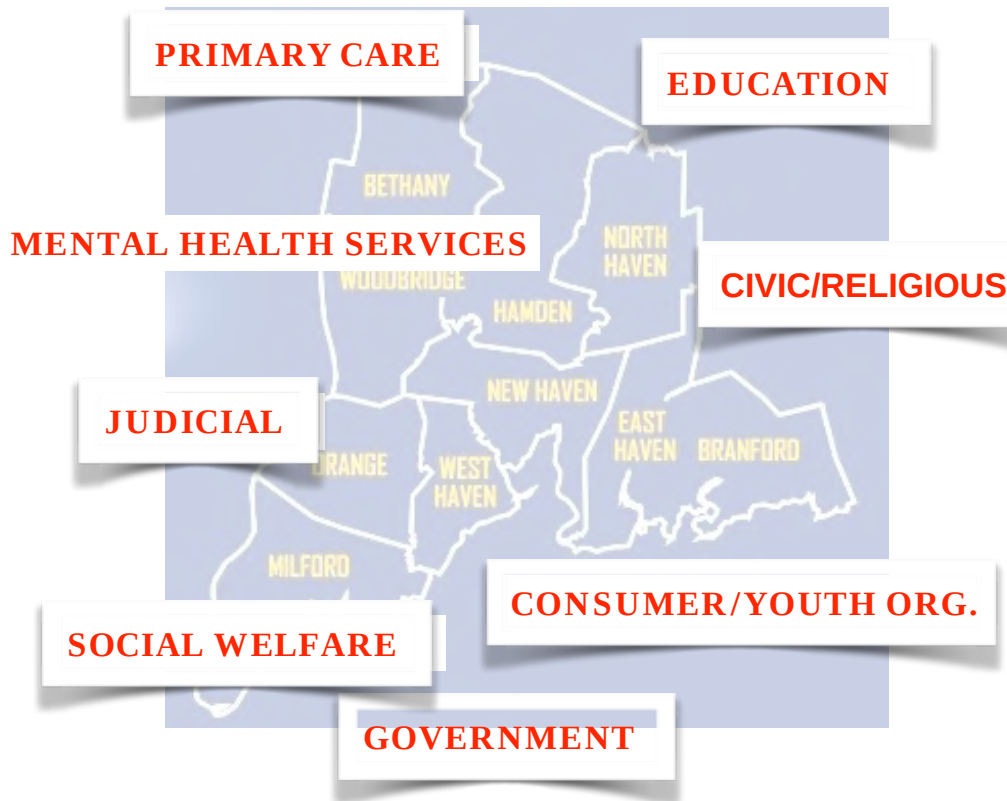
STEP has demonstrated both improved **quality** (outcomes) for those in care AND improved **access** targeting a defined catchment

This public-academic partnership has informed a comprehensive care pathway in the Greater New Haven area

Can we leverage this toward unmet need statewide?

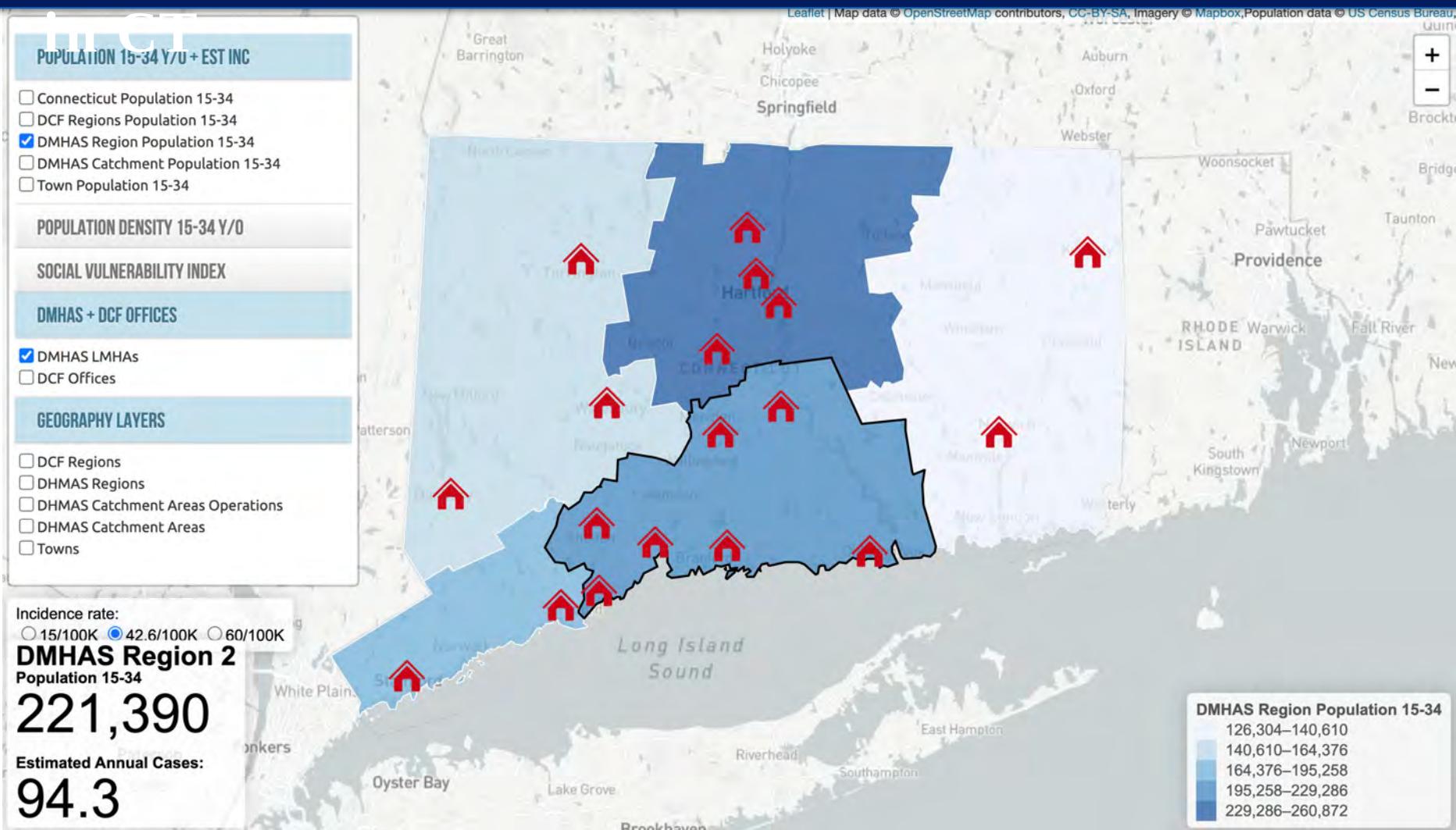


STEP's model in Southern CT (2015- present)



This course will overview EIS as a regional integrator of care pathways

Developing a Learning Health System across Connecticut



www.step.yale.edu; www.ctearlypsychosisnetwork.org; nina.levine@yale.edu