Article: 1585
Topic: 69 - Schizophrenia

SOCIAL ADAPTATION AND IMMUNE REACTIVITY IN SCHIZOPHRENIA

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Study of social-clinical and biological components of adaptation in schizophrenia currently is of relevance.
Objective: Identification of interrelationship immune reactivity with social adaptation types of schizophrenic patients.
Methods: We examined 38 schizophrenic patients (F20.00, F20.01, F20.02). The scale SASS (Bosc M. et al., 1997) was used to estimate the social adaptation of schizophrenic patients. The immunological examination included the definition of phenotypes of surface receptors of immunocompetent cells, immunoglobulins, circulating immune complexes and phagocytosis levels. The research was carried out in two points: first - at admission, second - in 6 weeks of treatment.
Results: Three adaptation types have been revealed: normal type of social adaptation (15 patients, 39,47%), difficult social adaptation (18 persons), disadaptation (5 patients). By week 6 of treatment number of patients with normal social adaptation has heightened by 1,4 times (21 patients, 55,26 %), improvement of indices of social adaptation was observed in 10 patients, type of social adaptation did not change in 28 patients.
At admission T-immunodeficiency ($CD2^+$, $CD3^+$, $CD16^+$-lymphocytes decrease), increase $CD8^+$, $HLADR^+$, $CD20^+$-lymphocytes, IgM and phagocytosis decrease were diagnosed among schizophrenic patients. During therapy, features of psychoneuroimmunomodulation were as follows: the normal type of social adaptation is relatively favorable in the immunological context. Patients with low level of social adaptation were characterized by clinical-immunological resistance toward therapy with deepening of T-cellular immune deficiency. Improvement of indices of social adaptation was accompanied by positive dynamic of immunological parameters.
Conclusion: Thus, social differences between groups have been confirmed by data according to immune reactivity.

https://doi.org/10.1016/S0924-9338(13)76584-2 Published online by Cambridge University Press