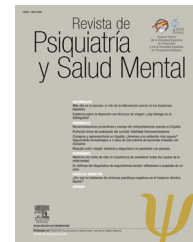




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ORIGINAL ARTICLE

Relationship between subclinical psychotic symptoms and cognitive performance in the general population[☆]



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KEYWORDS

Healthy volunteers;
Psychosis;
Cognition;
Executive functions

Abstract

Introduction: Subclinical psychotic symptoms are associated to negative life outcomes in the general population, but their relationship with cognitive performance is still not well understood. Assessing the relationship between performance in cognitive domains and subclinical psychotic symptoms in the general population may also help understand the handicap attributed to clinical psychosis, in which these alterations are present.

Methods: Subclinical and cognitive assessments were obtained in 203 participants from the general population by means of the Community Assessment of Psychic Experiences, the Brief Assessment of Cognition in Schizophrenia, the Wechsler Adults Intelligence Scale and the Wisconsin Card Sorting Test. The positive and negative subclinical symptoms and their relationship with age and cognition were examined, followed by assessing the influence of subclinical depression scores on the possible relationships between those subclinical psychotic symptoms and cognitive deficits.

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Results: Inverse relationships were found between frequency in the Community Assessment of Psychic Experiences positive dimension and motor speed, and frequency and distress in the Community Assessment of Psychic Experiences negative dimension and motor speed. A direct relationship was also found between distress scores of the positive dimension and executive functions. Both positive and negative subclinical symptoms were related to depression scores. **Conclusions:** Psychotic symptoms, similar to those in the clinical population, may be associated with cognitive deficits in the general population.

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PALABRAS CLAVE

Voluntarios sanos;
Psicosis;
Cognición;
Función ejecutiva

Relaciones entre síntomas psicóticos subclínicos y rendimiento cognitivo en la población general

Resumen

Introducción: En la población general, los síntomas psicóticos subclínicos se han asociado con mayores dificultades funcionales en la vida real, pero desconocemos si estos síntomas están asociados a un peor rendimiento cognitivo. El estudio de la relación entre las alteraciones cognitivas y estos síntomas puede, además, ayudarnos a comprender mejor las dificultades que presentan los pacientes con psicosis, en los que estas alteraciones cognitivas están presentes.

Métodos: Realizamos evaluaciones clínicas y cognitivas en 203 sujetos de la población general mediante los instrumentos Community Assessment of Psychic Experiences, Brief Assessment of Cognition in Schizophrenia, Wechsler Adult Intelligence Scale y Wisconsin Card Sorting Test. Se evaluó la relación de los síntomas psicóticos subclínicos positivos y negativos con la edad y el rendimiento cognitivo. Además, se evaluó la influencia de los síntomas depresivos subclínicos sobre la posible relación entre síntomas positivos y negativos subclínicos y las alteraciones cognitivas.

Resultados: Encontramos una relación inversa del rendimiento en la prueba de velocidad motora tanto con la frecuencia de síntomas positivos como con el estrés y la frecuencia de los síntomas negativos. También encontramos una relación directa entre el estrés de los síntomas positivos y el rendimiento en función ejecutiva. La puntuación en síntomas depresivos subclínicos se asoció con ambas escalas subclínicas, positiva y negativa.

Conclusiones: Los síntomas psicóticos subclínicos están relacionados con déficits cognitivos en la población general, similares a los observados en poblaciones clínicas.

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Introduction

Subclinical psychotic symptoms (SPS), such as delusions or hallucinations which are not so serious or involving in nature to require clinical care, are prevalent in the general population, and particularly in young people, and may be associated with individual cognitive performance. Their possible relationship with relevant cognitive impairment in clinical psychosis has therefore been the subject of several research studies. An inverse relationship between the score on the positive scale of the Community Assessment of Psychic Experiences (CAPE) instrument and verbal fluency was thus reported in a sample of the general population, ranging between 17 and 77 years of age.¹ This same group later researched the relationship between the scoring of the same questionnaire and the variables of episodic memory and speed of information processing, finding a weak but significant association between negative subclinical symptoms and processing speed.² More recently, another group, with a larger sample and using an IT application, reported the association of working memory with

subclinical psychotic (strange experiences) and depressive symptoms.³

The above mentioned studies have focused, a priori, on specific cognitive domains to assess their relationship with subclinical psychosis. However, as far as we are aware, few groups have used more extended neuropsychological batteries to this end. Among the latter, in one study with a non clinical adolescent population sample (with and without psychotic symptoms), the authors found there was a link between positive symptoms and processing speed.⁴ However, the findings from another more recent study show that the score on the scales of positive and negative subclinical psychotic symptoms are related to cognitive performance, using the Measurement and Treatment Research to Improve Cognition in Schizophrenia battery. Its authors found that the subjects with higher scores on the positive scale and to a lesser extent also on the negative scale, showed they had a higher performance in several cognitive domains.⁵

Assessment of the relationship between SPS in the general population and performance in different cognitive domains may also contribute to a better understanding

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