



## Review

# Trauma and recent life events in individuals at ultra high risk for psychosis: Review and meta-analysis



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## ARTICLE INFO

## Article history:

Received 22 August 2014

Received in revised form 11 November 2014

Accepted 19 November 2014

Available online 8 December 2014

## Keywords:

Childhood trauma

Life events

Psychosis

Ultra high risk

## ABSTRACT

**Background:** Childhood trauma and recent life-events have been related to psychotic disorders. The aim of the present study was to examine whether childhood trauma and recent life-events are significantly more prevalent in patients at Ultra High Risk (UHR) of developing a psychotic disorder compared to healthy controls.

**Method:** A search of PsychInfo and Embase was conducted, relevant papers were reviewed, and three random-effects meta-analyses were performed. One meta-analysis assessed the prevalence rate of childhood trauma in UHR subjects and two meta-analyses were conducted to compare UHR subjects and healthy control subjects on the experience of childhood trauma and recent life-events.

**Results:** We found 12 studies on the prevalence of (childhood) trauma in UHR populations and 4 studies on recent life-events in UHR populations. We performed a meta-analysis on 6 studies (of which trauma prevalence rates were available) on childhood trauma in UHR populations, yielding a mean prevalence rate of 86.8% (95% CI 77%–93%). Childhood trauma was significantly more prevalent in UHR subjects compared to healthy control groups (Random effects Hedges'  $g = 1.09$ ;  $Z = 4.60$ ,  $p < .001$ ). In contrast to our hypothesis, life-event rates were significantly lower in UHR subjects compared to healthy controls (Random effects Hedges'  $g = -0.53$ ;  $Z = -2.36$ ,  $p < .02$ ).

**Conclusions:** Our meta-analytic results illustrate that childhood trauma is highly prevalent among UHR subjects and that childhood trauma is related to UHR status. These results are in line with studies on childhood trauma in psychotic populations. In contrast to studies on recent life-events in psychotic populations, our results show that recent life-events are not associated with UHR status.

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## 1. Introduction

A growing body of literature has addressed the role of childhood trauma as one of the risk factors for the development of psychosis (Morgan and Fisher, 2007; Bendall et al., 2008; Krabbendam, 2008; Varese et al., 2012). Childhood trauma is defined as psychological, physical, emotional or sexual abuse, and emotional neglect, before age 17 years (Bernstein et al., 2003). Higher rates of traumatic events have been found in individuals with psychotic disorders compared to the general population (Janssen et al., 2004; Bebbington et al., 2011). In a recent meta-analysis examining both retrospective and prospective studies, early childhood trauma was found to increase the odds of psychotic disorder by almost a factor 3 (Varese et al., 2012).

Although most studies investigating the relationship between trauma and psychosis have focused on childhood adversity before age 17 years, there is growing evidence for a role for recent stressful life events in the pathway to psychosis. Recent stressful life events are defined as events in the last months prior to onset of psychosis that usually involve danger and that cause a substantial change in one's positive or negative personal circumstances (Brown and Birley, 1968). A recent meta-analysis of 16 studies on the association between recent life events and onset of psychosis reported that individuals with psychotic disorders were three times more likely to have experienced recent life events prior to the onset of psychosis compared to healthy controls (Beards et al., 2013).

Criteria have been established to identify ultra-high risk (UHR) patients, mainly based on the presence of subthreshold psychotic symptoms in help-seeking individuals with a recent decline in social functioning (Yung et al., 2003, 2005, 2006). The focus of studies on childhood trauma or recent life events has recently broadened to UHR

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patients (Bechdolf et al., 2010; Thompson et al., 2010; Phillips et al., 2012; Addington et al., 2013).

The present study aimed to present all available results on both early childhood trauma and recent stressful life events in UHR populations. The prevalence rate of traumatic events in UHR patients was estimated based on a meta-analysis. Following evidence from studies in clinical samples (Bendall et al., 2008; Beards et al., 2013), we hypothesized that childhood trauma and recent life events would be significantly more prevalent in UHR patients than in healthy controls.

## 2. Methods

### 2.1. Data collection

Following the PRISMA database search guidelines ([www.prisma-statement.org](http://www.prisma-statement.org)), systematic database searches of publications from 1993 (year of first UHR paper) to April 2014 were conducted in Embase and PsychINFO, including all UHR studies that involved data on trauma or recent life events. We combined the following sets of keywords:

- 1) 'ultra high risk' OR 'uhr' OR 'prodrome' OR 'prodromal' OR 'at high risk' OR 'clinical\* at risk' OR 'at clinical\* risk' OR 'clinical high risk' OR 'at risk mental state' OR 'arms' OR 'attenuated symptoms' OR 'blips' OR 'brief limited intermittent psychotic symptoms' OR 'psychosis risk symptoms' OR 'HR' OR 'CHR' OR 'caarms' OR 'sips'
- 2) 'psychosis' OR 'psychotic disorder' OR 'schizophreni\*' OR 'schizo\*' OR 'psychoti\*' OR 'halluci\*' OR 'delusion\*' OR 'voice\*' OR 'thought disorder' OR 'paranoi\*'
- 3) 'trauma\*' OR 'life event\*' OR 'event\*' OR 'abuse' OR 'victim\*' OR 'advers\*' OR 'trauma' OR 'bully\*' OR 'bullying\*' OR 'cyberbullying' OR 'neglect'

The search yielded 2835 studies. Three studies were added after manual searches in PubMed (Addington et al., 2013; Devylder et al., 2013; Thompson et al., 2013a) resulting in a total of 2838 studies.

First, the publications were screened by title. In a second screening the abstracts were scrutinized for relevance. Subsequently, a final screening of the full-text was conducted (Fig. 1).

### 2.2. Data extraction

Publications were considered eligible, if they:

- a) included data on individuals meeting At-Risk Mental State (ARMS) criteria as defined by the Personal Assessment and Crisis Evaluation (PACE) clinic (Yung et al., 2005) or UHR criteria as defined by the Structured Interview for Prodromal Syndromes criteria (SIPS; (Miller et al., 2002)
- b) reported on early childhood trauma or recent life events in relation to UHR status in a cross-sectional or prospective design. Childhood trauma was defined as physical, psychological, sexual or emotional abuse and emotional neglect before age 17 years. Recent life events were defined as events in the last months prior to assessment that usually involve danger and that cause a marked negative or positive emotional reaction.

Publications were excluded if they only reported on stress without specifically referring to recent life events or (childhood) trauma, or if UHR was measured by criteria other than the Comprehensive Assessment of At Risk Mental State (CAARMS) (Yung et al., 2005) or SIPS (Miller et al., 2002).

After exclusion, 16 publications remained covering 11 studies reporting on (childhood) trauma or recent life events in 1111 UHR patients and 335 healthy controls.

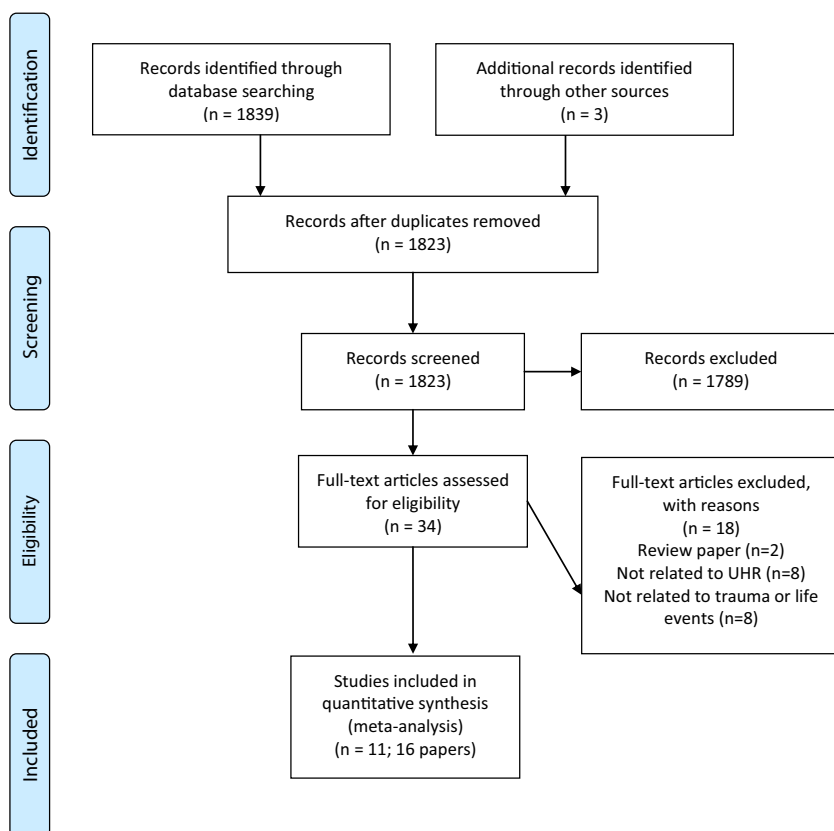


Fig. 1. Flowchart of selected studies.

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