Metacognition, social cognition, and symptoms in patients with first episode and prolonged psychoses


Schizophrenia Research
4 February 2014

http://dx.doi.org/10.1016/j.schres.2014.01.012

Abstract

While it has been documented that persons with prolonged schizophrenia have deficits in metacognition and social cognition, it is less clear whether these difficulties are already present during a first episode. To explore this issue we assessed and compared metacognition using the Metacognition Assessment Scale—Abbreviated (MAS-A) and social cognition using the Eyes, Hinting and Bell—Lysaker Emotional Recognition Tests (BLERT) in participants with first episode psychosis (FEP; n = 26), participants with a prolonged psychosis (n = 72), and a psychiatric control group consisting of persons with a substance use disorder and no history of psychosis (n = 14). Analyses revealed that both psychosis cohorts scored lower than controls on the MAS-A total and all subscales except metacognitive mastery. Compared to the FEP group, the persons with prolonged psychosis demonstrated greater metacognitive capacities only in those MAS-A domains reflective of the ability to understand the mental state of others and to see that others may have motivations and desires separate from their own. Other domains of metacognition did not differ between psychosis groups. The Eyes, Hinting and BLERT scores of the two psychosis groups did not differ but were poorer than those produced by the control group. Exploratory correlations in the FEP group showed a pattern similar to that previously observed in prolonged psychosis. Taken together, these findings suggest that while certain domains of metacognition could improve with prolonged psychosis, difficulties with global metacognition and social cognition may be stable features of the disorder and perhaps unique to psychosis.