
PSYCHOPATHOLOGY AND PATTERN OF TOBACCO USE IN PATIENTS WITH SCHIZOPHRENIA.

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Introduction: The self-medication hypothesis proposes that schizophrenia patients may smoke as an attempt to reduce their cognitive deficits, their symptoms or the antipsychotic side-effects.

Aim: to identify the relationship between the smoking topography and psychopathology among outpatients with DSM-IV schizophrenia.

Method: The sample included 26 smoking outpatients with DSM-IV schizophrenia from a Mental Health Center sited in the North of Spain [65.5% males; mean age (SD) = 44.66 (7.83)]. Instruments: (1) Psychopathology: Positive and Negative Syndrome Scales (PANSS); Clinical Global Impression of Severity (CGI-S); n° antipsychotic. (2) Pattern of tobacco use: n° cigarettes/day; Fargerstrom test for nicotine physical dependence; Glover-Nilsson test for nicotine psychological dependence; Expired carbon monoxide (CO ppm).

Results: prevalence was 59.3% for non-heavy smokers [<30 cigarettes/day; Mean CO (SD)= 24 ppm (9.70)] and 40.7% for heavy smokers [≥30 cigarettes/day; Mean CO (SD) = 36 ppm (16.06)]. PANSS mean score (SD) = 54.07 (12.45); CGI-G mean score (SD) = 3.50 (1.17); Mean number of antipsychotic (SD) = 1.79 (0.88). No significant differences were found between the severity of the psychopathology (PANSS, CGI-S, n° antipsychotic) and all the variables of the pattern of tobacco use (n° cigarettes/day; expired carbon monoxide; Fargerstrom; Glover-Nilsson).

Conclusion: In this sample of schizophrenia patients, there is no relation between the severity of psychopathology and the dependence of nicotine. However, the sample of this study is small.