

P-1276 - THE FUNCTIONAL BRAIN'S ASYMMETRY ACCORDING TO THE DIMENSIONAL MODEL OF SCHIZOPHRENIA

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Introduction: Three clinical “dimensions” are identified for schizophrenia: positive (delusions, hallucinations, thought automatism), disorganization (inappropriate affect, bizarre behavior, formal-thought disorders), negative (affective flattening, alogia, abulia-apathy, anhedonia-asociality).

Objectives: To evaluate Individual Profile of Functional Asymmetry (IPFA) influence on schizophrenia's clinical polymorphism.

Aims: To compare IPFA in 90 healthy subjects and 90 schizophrenic patients in three clinical groups, depending on prevalence of positive, negative symptoms or disorganization.

Methods: SAPS/SANS; dichotic listening; test "card with the hole", "viewing through a telescope"; accuracy of tracking and key press speed tests; SPSS'10.0. The coefficient of right ear (CRE), the coefficient of right hand (CRH) were calculated; seven IPFA types determined by CRH/CRE ratio, depending on function's laterality type and degree.

Results: Patients unlike controls revealed: higher frequency of right-sided hearing asymmetry (50% vs. 22%), higher average values of CRE (9,57% vs. 3,1%) and |CRE| (19,98% vs. 10,63%), higher rates of IPFA types with minimal excess |CRH| over |CRE| (less than 5 times) (30% vs.20%) and “inverted” types (|CRE|>|CRH|) (15.5% vs. 5.5%). Controls were more likely to have large predominance of CRH over CRE (more than 5 times) (17.8% vs. 5.6%).Ambidexterity dominated in “negative” dimension group, right hand prevailed in others. Positive symptoms degree directly correlated with CRE. “Negative” type inversely correlated with CRH and |CRH|.

Conclusions: Increased right-sided hearing asymmetry points to verbal agnosia of signals coming from the left-side auditory space, which is more related to positive symptoms; negative symptoms are more related to motor function's symmetry. Protective and promoting IPFA types determined.