

Multiple regressions analyses were carried out, in which indices of social functioning were the dependent variables and psychopathological dimensions, neuropsychological indices, antipsychotic treatment type, duration of illness, age and education were the independent variables.

Verbal memory, executive function and sustained attention indices explained together 19.9% of the global disability variance, while negative symptoms explained only 4.4% of the variance. Sustained attention explained 7.2% of the variance of subjects' "availability to start work", while verbal memory explained 11.1% of the variance of subjects' ability to start and maintain affective relationships.

Our findings suggest that cognitive impairment is an important feature of schizophrenia whose relationships with social functioning is stronger than that of psychopathology.

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Semantic fluency in schizophrenia

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Background: Patients with schizophrenia exhibit various cognitive dysfunctions, most of them rendered evident by language.

Objectives: The aims of the current study are: to compare the global semantic performance of schizophrenics with those of normal controls and to explore the schizophrenics' semantic network.

Method: 62 schizophrenic patients, admitted to the Second Psychiatric Clinic Cluj, diagnosed according to ICD-10 criteria and 158 healthy controls were evaluated with tasks for semantic fluency (animals, fruits and body parts).

Statistical analysis: The correlation between clinical symptoms, demographic data and the verbal fluency variables has been determined using Pearson's correlations. The data were analysed using ANOVA and for semantic fluency this was followed by multidimensional scaling (MDS).

Results: Patients with schizophrenia generated fewer words than healthy controls on semantic fluency tasks. The MDS analysis showed that the semantic structure for schizophrenics with hallucinations was more disorganized than that for the schizophrenics without hallucinations. The schizophrenics with hallucinations appeared to lack any organisation or logical associations within their semantic network of animals, fruits or body parts.

Conclusions: The comparison between schizophrenia patients as a whole and normal controls indicated impaired semantic structure in the patient group, in addition to decreased word production.

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Anomalous subjective experiences as a tentative new direction for a youth-targeted psychometric high-risk approach

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Background: To assess subtle pre-psychotic anomalies of subjective experiences in adolescents might become a key point for early screening of psychotic risk. Yet the ideal instrument would need to be a brief, responsive, reliable, and valid measures that can be

implemented in strategic extra-clinical community settings with minimal cost and burden. The Frankfurt-Pamplona Subjective Experience Scale is a 18-item, likert-format, self-report measure developed on the basis of empirically-derived condensation of the Frankfurt Complaint Questionnaire (Cuesta et al., 1996).

Objective: The objective of this study was to field test the Italian adaptation of the FPSES, assess its reliability and validity and explore eventual overlap with schizotypal personality traits.

Methods: A pilot field test was implemented in a randomized sample of both high school and university classes in the urban area of Novara (Italy). A total of about 208 students agreed to participate. Internal consistency and factor analytic methods were used to assess the psychometric properties of the instrument.

Results: The FPSES revealed a high internal consistency and a monofactorial item segregation independent of schizotypal dimensions.

Conclusions: Analyses of the FPSES supported its reliability and validity for assessing experiential vulnerability in a non-intrusive way. Self-perceived experiential vulnerability showed only minimal overlap with concomitant schizotypal traits and defines a putatively autonomous domain of individual pre-psychotic liability. Normative data for the sample are presented.

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Anomalous incipency in self-narratives: A naturalistic, qualitative exploration of self-experienced liability in prodromal patients

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Background: albeit ultra-high risk (UHR) mental state for developing a psychosis is currently defined mainly by attenuated (APS) and transient psychotic symptoms (BLIPS), subtle not-yet psychotic anomalies of self-experience occur in a substantial proportion of prodromal patient even prior to any detectable diagnostic symptom.

Methods: in-depth, multiple, phenomenologically-driven psychiatric interviews were conducted in a sample of about 14 first admitted prodromal patients and their families, together with standardized psychometric evaluation.

Subjects' detailed first-person self-descriptions were collected and transcribed in the clinical files and re-evaluated, specifically targeting the biographical emergence of disorders of self-experience, interpersonal attunement and axiological idiosyncrasy.

Results: recurrent patterns of morbid self-experience were identified, especially inhering a fading of the basic sense of self-intimacy (i.e. diminished ipseity or self-affection) and a related strive to maintain the coherent self-narrative. Such patterns were meaningfully connected with the current clinical symptomatology and interpersonal functioning of the patients. Phenomenological-oriented interviewing revealed dramatic effects in modulating contingent subjective self-stigmatization and environmental expressed emotion.

Conclusions: not-yet psychotic anomalies of subjective experience are relevant in the characterization of UHR mental states and are subtended by profound transformation of the basic structures of consciousness (i.e. intentionality, temporality, spatiality, embodiment). Such prereflective and near-ineffable experiences can be grasped by means of a phenomenological approach.