

PROGRAM
AND
PAPERS ON NEW RESEARCH
IN SUMMARY FORM

THE ONE HUNDRED AND FORTY-FOURTH
ANNUAL MEETING OF THE
AMERICAN PSYCHIATRIC ASSOCIATION

NEW ORLEANS, LOUISIANA
May 11-16, 1991

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Monday May 13, 9:00 a.m.-10:30 a.m.

Neurocognitive Components of Chronic Schizophrenia

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Opler, M.D., Stanley R. Kay, Ph.D. (Posthumously), Carl E.

Rosenkilde, M.D., Paul M. Ramirez, Ph.D., Julio Moizeszowicz,
M.D., Amy S. Gorelick, M.D.

Summary:

We developed a battery of neurocognitive tests in an effort to clarify the diverse neuropsychological abnormalities in schizophrenia. A sample of 42 neuroleptic-treated, chronic schizophrenic inpatients (29 males and 13 females, mean age 35.9 years and mean duration of illness 3 years) were examined on this battery and on a series of independent, clinical, psychometric, and historical variables. From a principal component analysis of the neurocognitive battery, six orthogonal factors emerged that reflected different facets of the schizophrenic disorder: stimulus processing, hyperarousal, negative syndrome, ontogenic variables, general intelligence, and autism. Multiple regression analysis indicated that these factors are associated with separate sets of criterion variables. This suggests that the six neurocognitive components may reflect the heterogeneity of schizophrenia, which is manifested in different types of neuropsychological consequences. Of particular interest was the emergence of neurocognitive factors that (a) relate to positive vs. negative symptom profiles and (b) are consistent with both the developmental and information processing models of cognitive disorder. Our findings thus suggest that the emergent neurocognitive components derive from independent dysfunctions in schizophrenia.