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Optimal duration of an early intervention programme for first-episode psychosis: randomised controlled trial.

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Abstract

Background Numerous early intervention services targeting young people with psychosis have been established, based on the premise that reducing treatment delay and providing intensive treatment in the initial phase of psychosis can improve long-term outcome. Aims To establish the effect of extending a specialised early intervention treatment for first-episode psychosis by 1 year. Method A randomised, single-blind controlled trial (NCT01202357) compared a 1-year extension of specialised early intervention with step-down care in patients who had all received a 2-year intensive early intervention programme for first-episode psychosis. Results Patients receiving an additional year of specialised intervention had better outcomes in functioning, negative and depressive symptoms and treatment default rate than those managed by step-down psychiatric care. Conclusions Extending the period of specialised early intervention is clinically desirable but may not be feasible in lower-income countries.

Royal College of Psychiatrists.

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