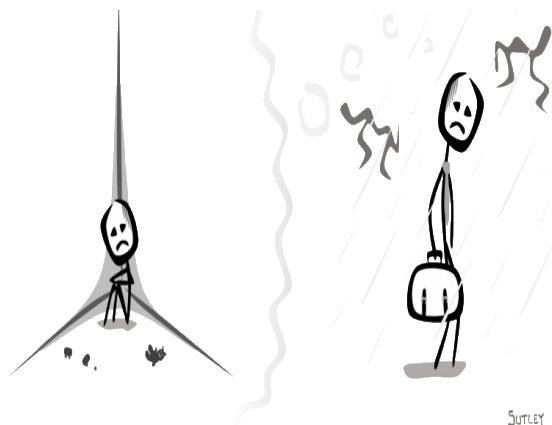




Traumatisme infantile et son impact clinique dans la psychose, mécanismes d'action psychologiques

Luis Alameda
Tipp-Program CHUV



- Traumatismes, une préoccupation à l'origine de développements psychanalytiques, théories psychogéniques (1895-1950).
- La mère schizophrénogène (années 1950-1970). "*Toward a theory of schizophrenia*". Bateson *Behavioral Science* (1956).
- 1950-1970: début des neurosciences et premiers traitements neuroleptiques.
- 1976 premières recherches en génétique (Seymour Kety 1976 *Critical Issues in Psychiatric Diagnosis*).
- Retour de l'environnement: 1987: "*Is Schizophrenia a neurodevelopmental disorder*" (Lewis and Murray 1987; British medical Journal).

IN 1987 THE NEURODEVELOPMENTAL THEORY WAS PROPOSED

BRITISH MEDICAL JOURNAL

LONDON, SATURDAY 19 SEPTEMBER 1987

S.W. Lewis and R.M. Murray

Is schizophrenia a neurodevelopmental disorder?

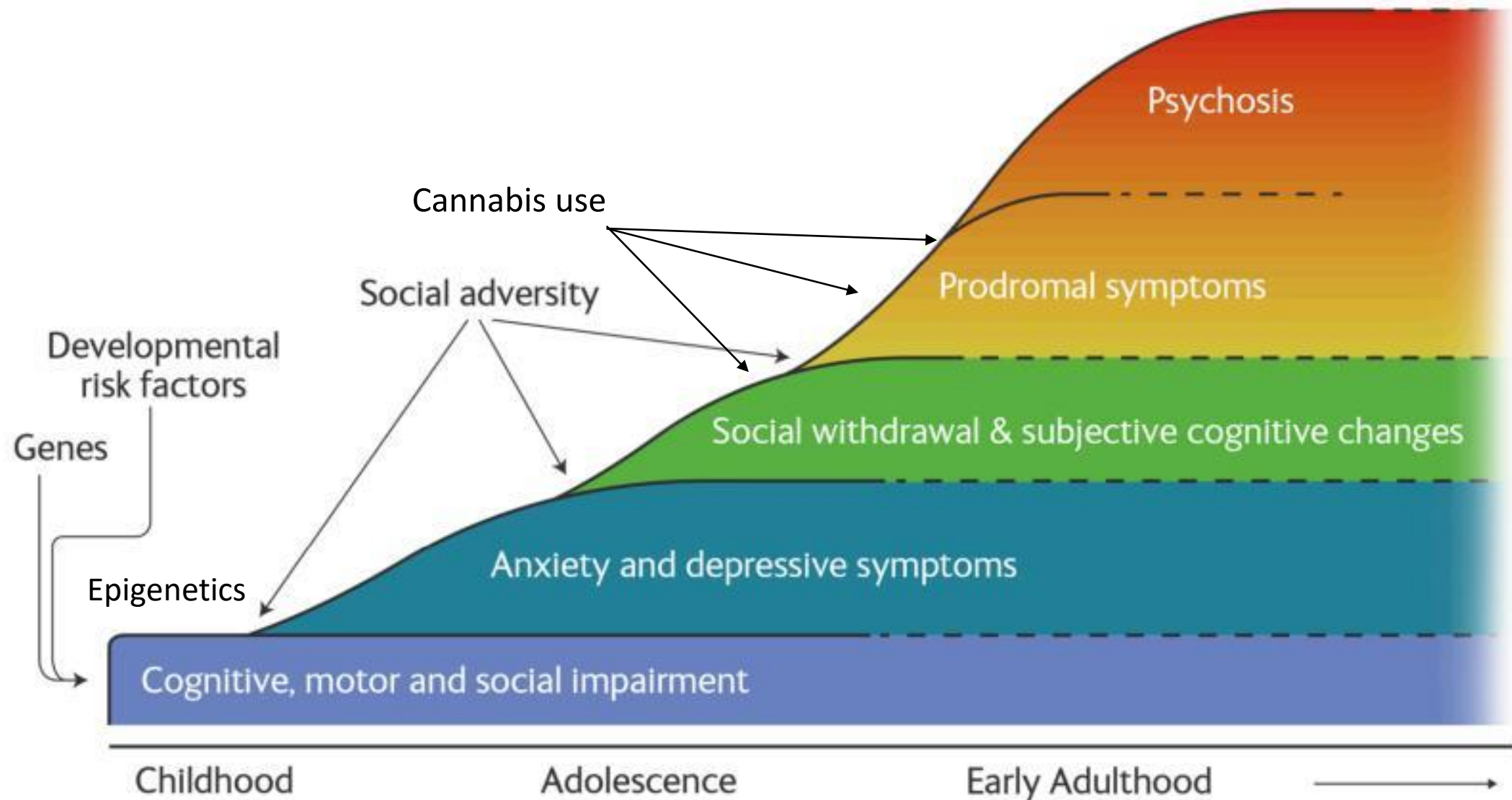
A well established fact about schizophrenia is that first degree relatives have an increased risk of the disorder. Few now doubt that schizophrenia has a genetic basis, yet its mode of inheritance has to be explained. Even the identical twin of a schizophrenic stands a better than 50% chance of escaping the illness.¹ Genetic factors are not the whole story.

Kraepelin, who derived the concept of schizophrenia, considered that both heredity and organic brain disease were implicated, but somehow the organic aspects were neglected

graphy, and schizophrenia? The early development of the central nervous system is characterised not only by cellular proliferation and neuronal migration but also by cell death.¹⁶ Complications during pregnancy and at birth can interfere with this neuronal fallout and impair the organisation of axonal connections, which leads to immature patterns of cells and their projections persisting.¹⁶ Recent neuropathological findings in schizophrenia are suggestive of such neuronal damage early in life.^{17 18}

Les complications pendant la grossesse et à la naissance peuvent interférer avec le développement neural normal

A socioneurodevelopmental model of psychosis (Howes and Murray; Lancet 2014)

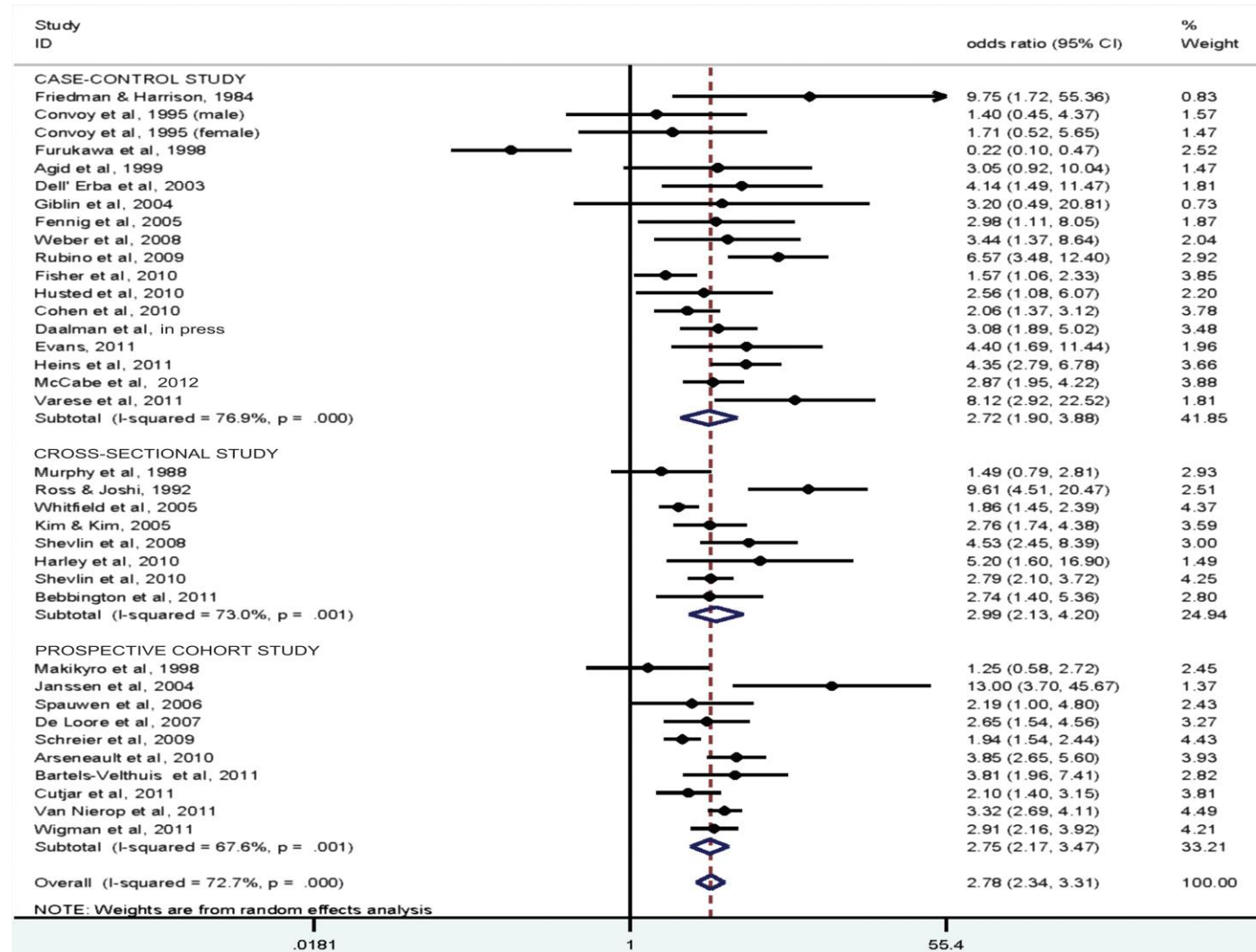


The environment and schizophrenia

Jin Van Os et al., 2010, *Nature*



Childhood Adversities Increase the Risk of Psychosis: A Meta-analysis of Patient-Control, Prospective- and Cross-sectional Cohort Studies

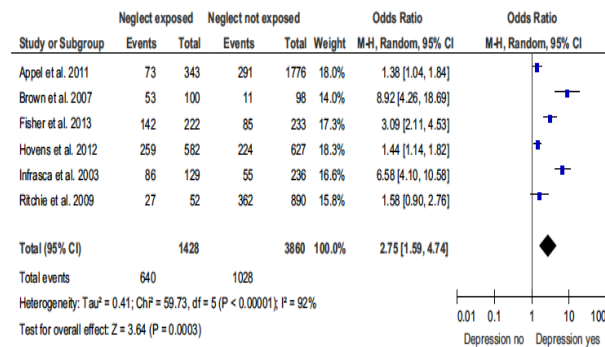
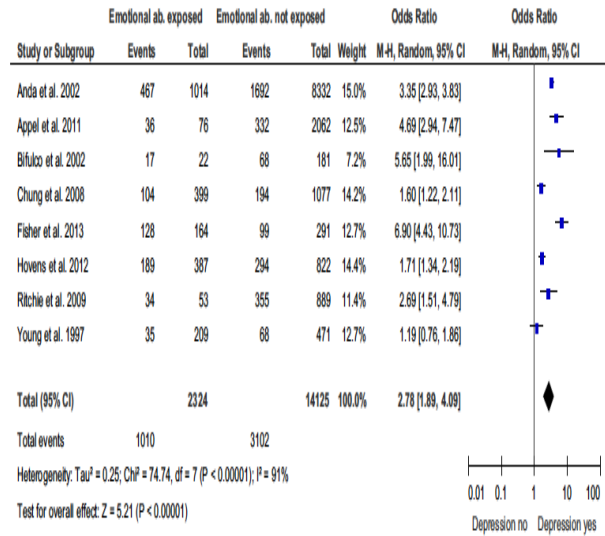


There were significant associations between adversity and psychosis across all research designs, with an overall effect of OR = 2.78 (95% CI = 2.34–3.31). The integra-

(Varese & al., Schizophr Bull 2013).

CHILHOOD TRAUMA AND MENTAL HEALTH

DEPRESSION

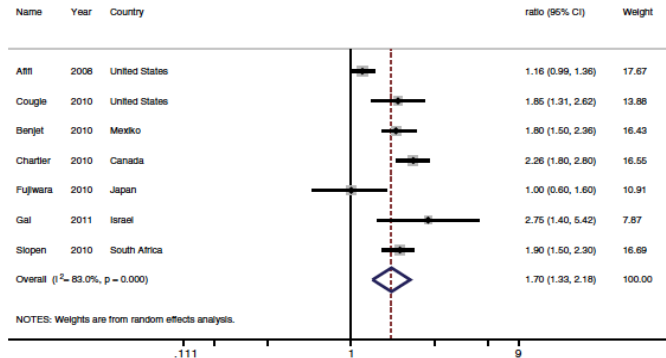
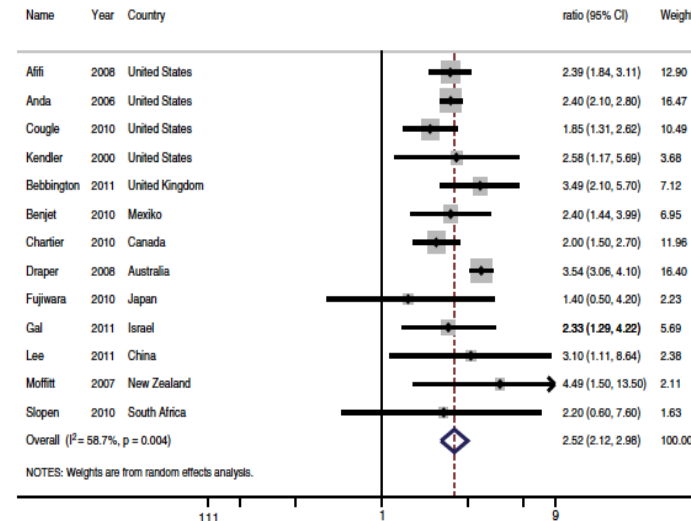


k=26

OR = 2.4

Mandelli & al., European Psychiatry 2015

ANXIETY

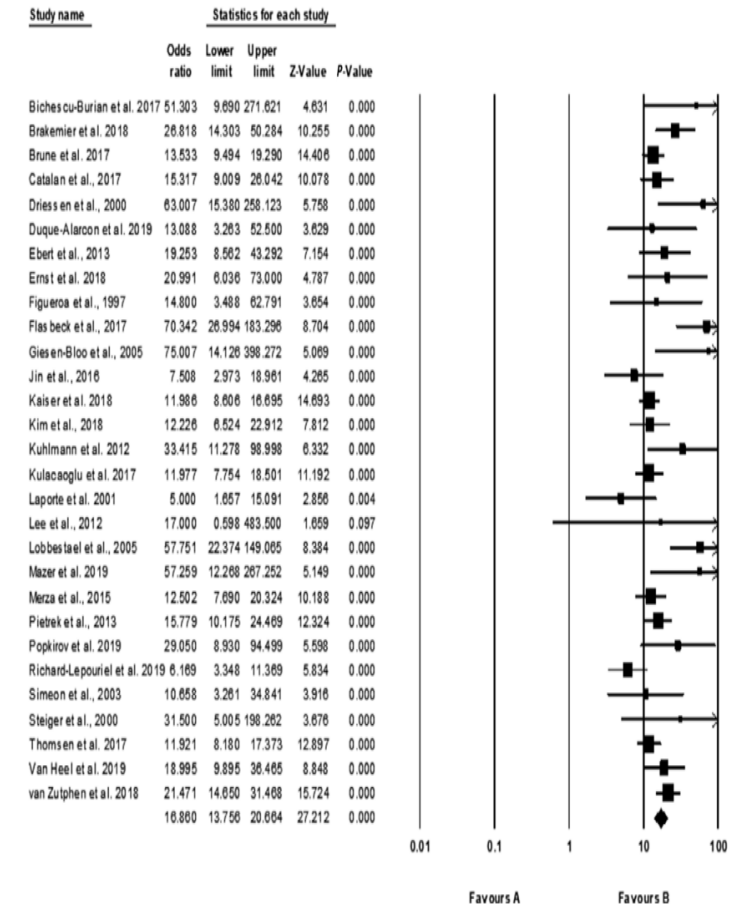


k=19

OR = 2.1

Lindert & al., Int J Public Health (2014)

BORDERLINE PD



Favours A

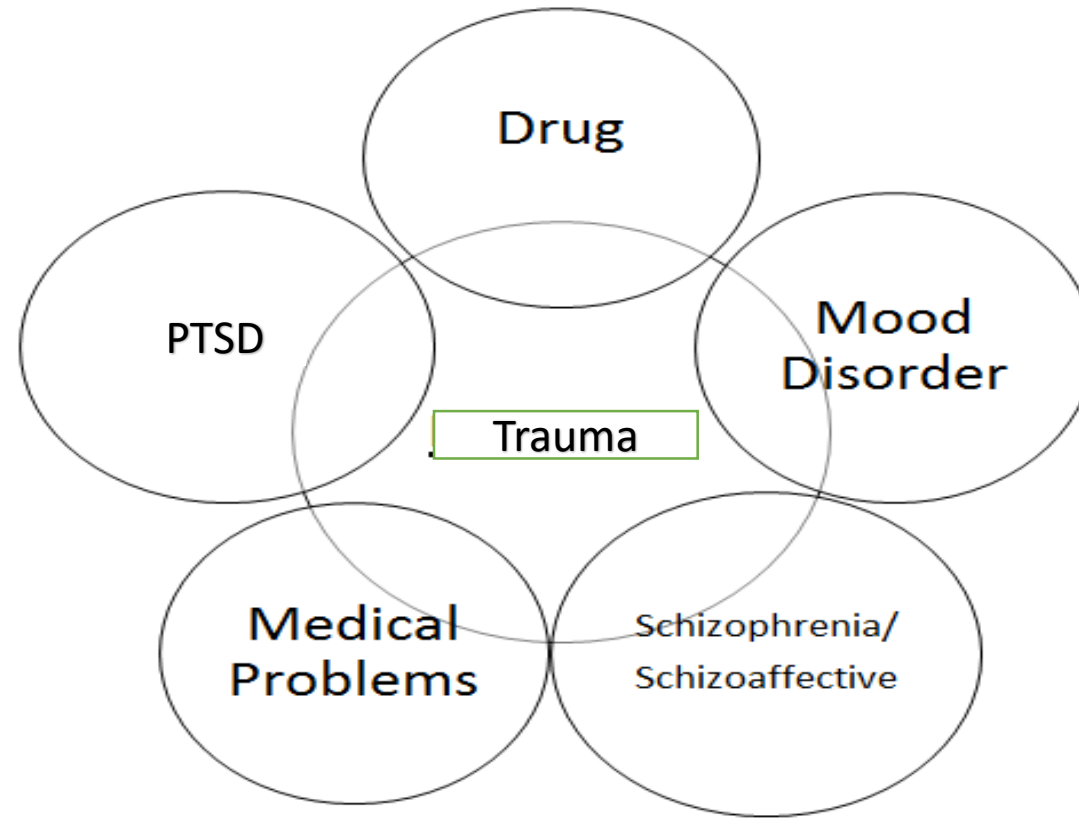
Favours B

k=29

OR = 16

PORTER c. & al., Âcte Psych Scand (2020)

Trauma et sa nature transdiagnostique



Et plus...

Quelle est la nature de l'association entre trauma et psychose?

Meta-analysis examinant l'association entre les différents types de traumatismes et différents types de dimensions cliniques (Alameda L. et al., *Schizophrenia Bulletin* 2021 Jul 8;47(4):959-974)

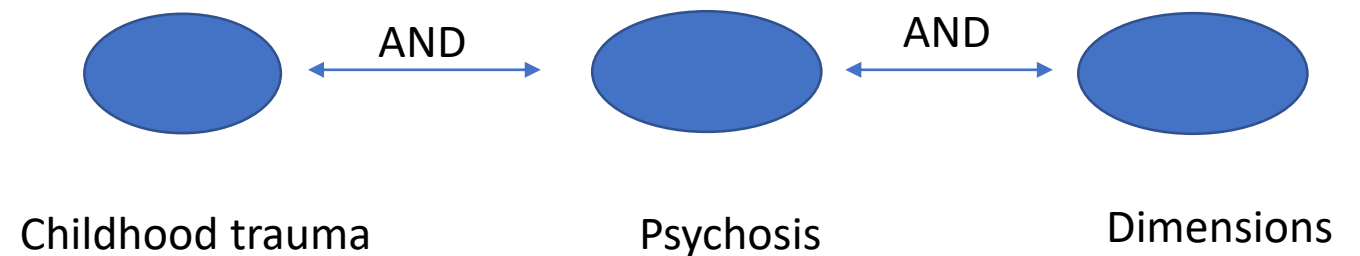
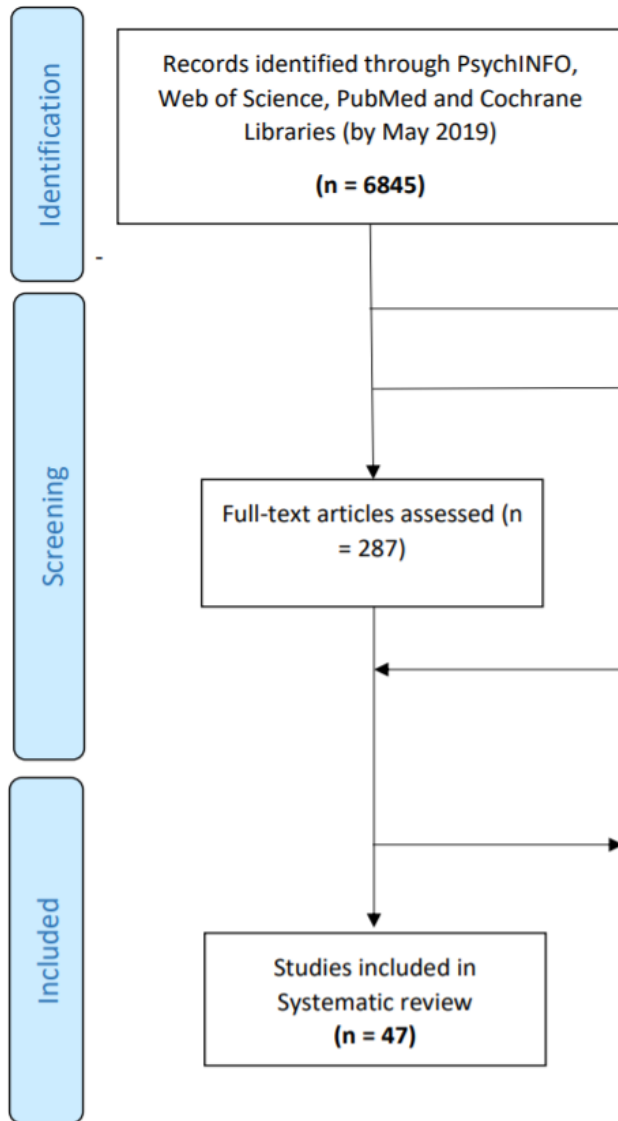
Quels sont les mécanismes?

A systematic review on mediations between adversity and psychosis (Alameda L. et al., *Psychological medicine* 2020 Sep;50(12):1966-1976)

Association Between Specific Childhood Adversities and Symptom Dimensions in People With Psychosis: Systematic Review and Meta-Analysis

Luis Alameda^{*,1,2,3}, Angeline Christy^{1,13}, Victoria Rodriguez^{1,13}, Gonzalo Salazar de Pablo^{4,5}, Madeleine Thrush¹, Yi Shen¹, Beatriz Alameda⁶, Edoardo Spinazzola¹, Eduardo Iacononi^{1,7}, Giulia Trotta⁸, Ewan Carr⁹, Miguel Ruiz Veguilla³, Monica Aas^{1,10,11}, Craig Morgan¹², and Robin M Murray¹

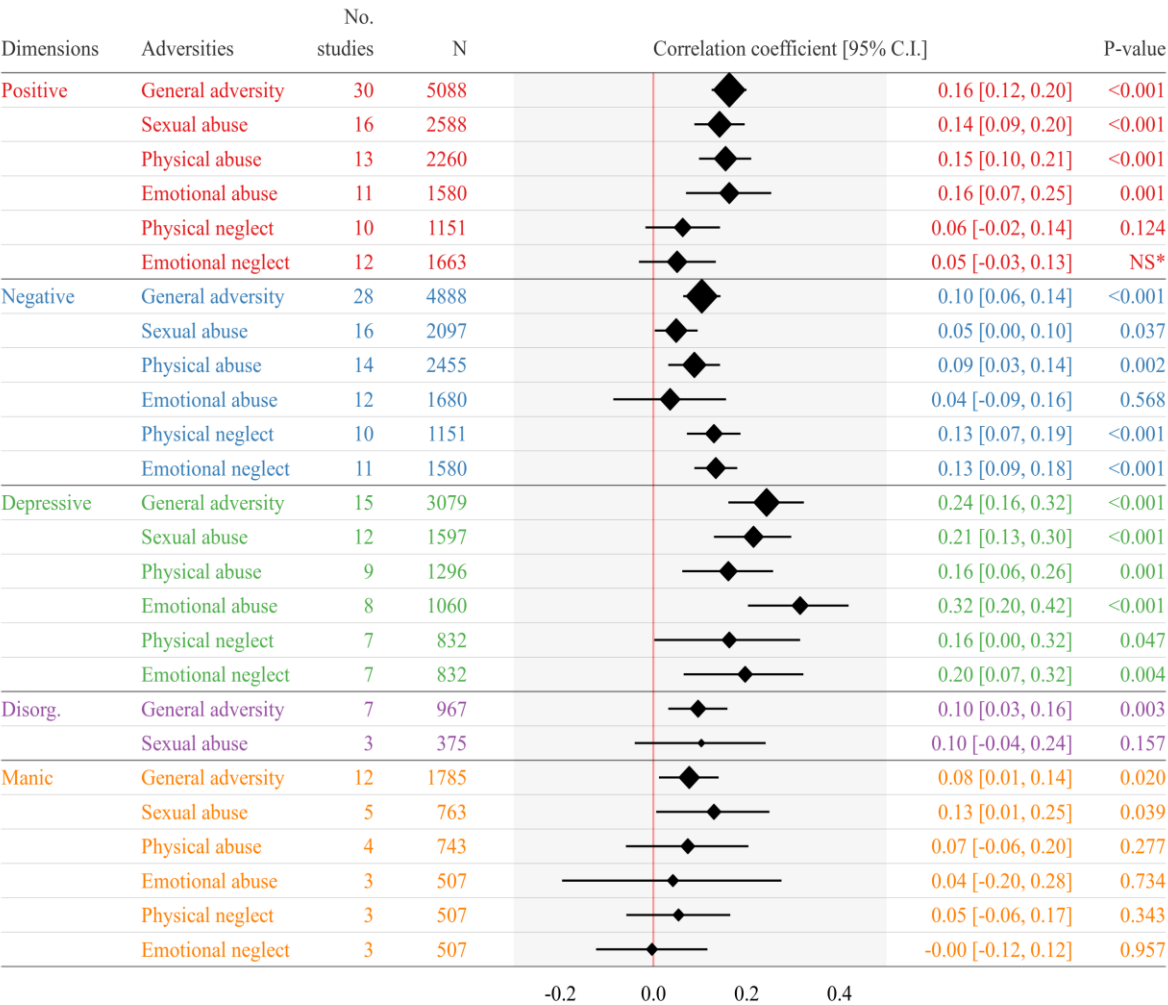
Schizophrenia Bulletin 2021 Jul 8;47(4):959-974



7379 cases across 47 studies overall
40 studies examining positive, 37 negative, 20
depressive, 9 disorganised and 13 manic dimensions

Summary of the meta-analyses conducted by type of adversity in each of the dimensions

Figure 1A: Summary of the meta-analyses conducted by type of adversity in each of the clinical dimensions



*NS = non-signifiant P-value. These results are adjusted for publication bias by the 'Trim-and-fill' procedure because considerable publication bias was found as reflected by a significant Egger test (p = 0.007).

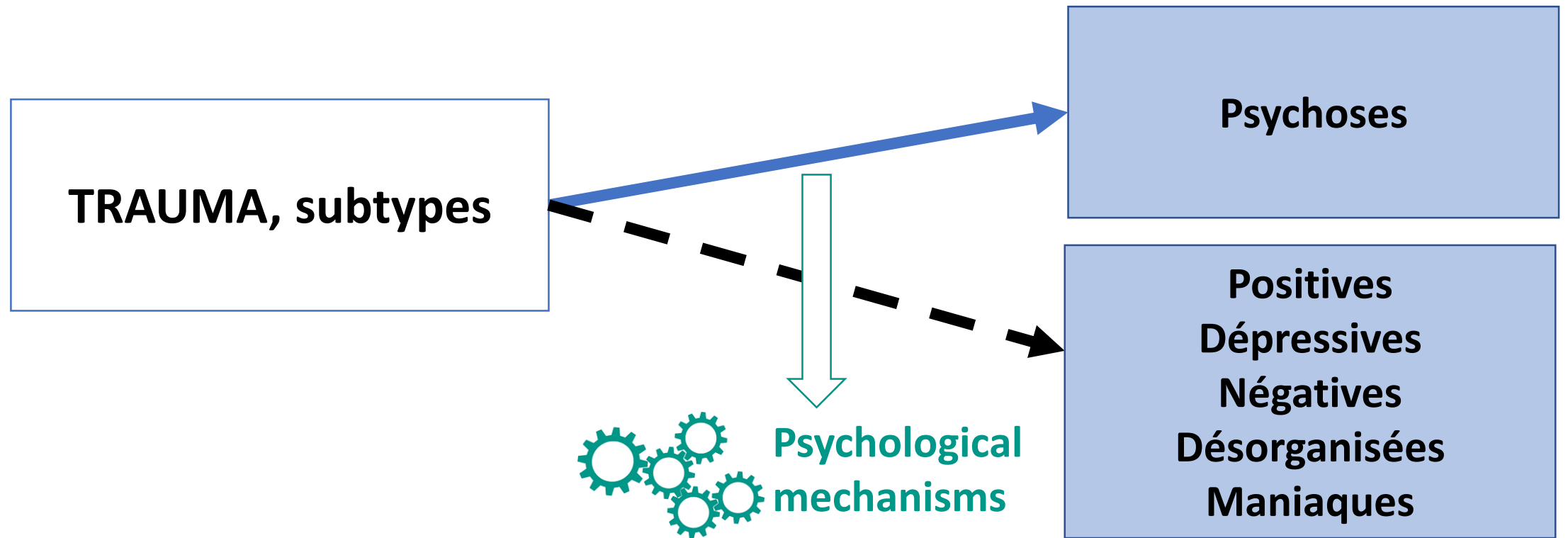
Abuse associated with hugher positive symptoms

Neglect associated with higher negative symptoms

All forms of trauma led to higher severity of depressive symptoms (gender differences)

Weak evidence addressing manic and disorganized

specificity

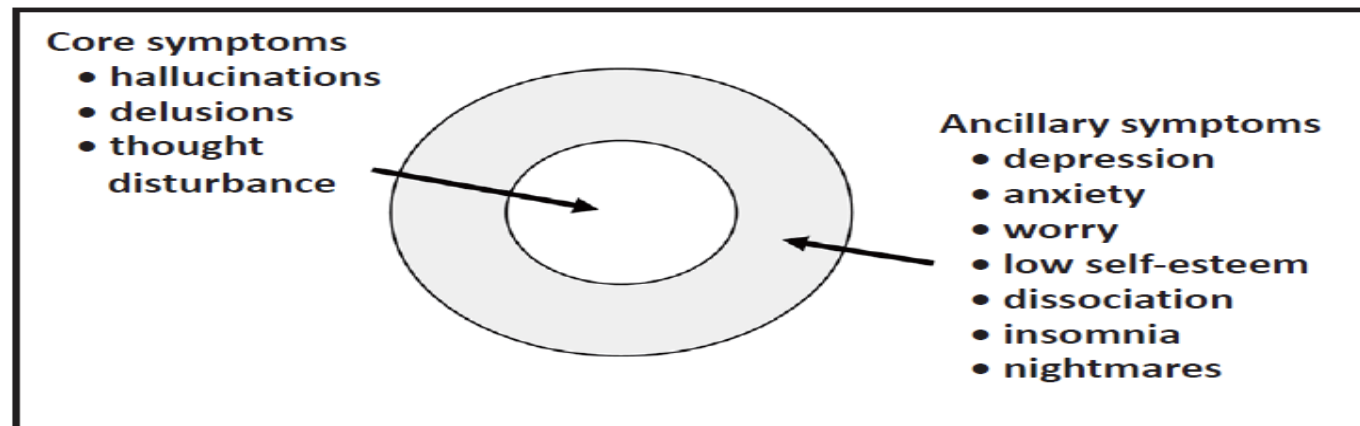


Unravelling psychosis: psychosocial epidemiology, mechanism, and meaning

Paul BEBBINGTON

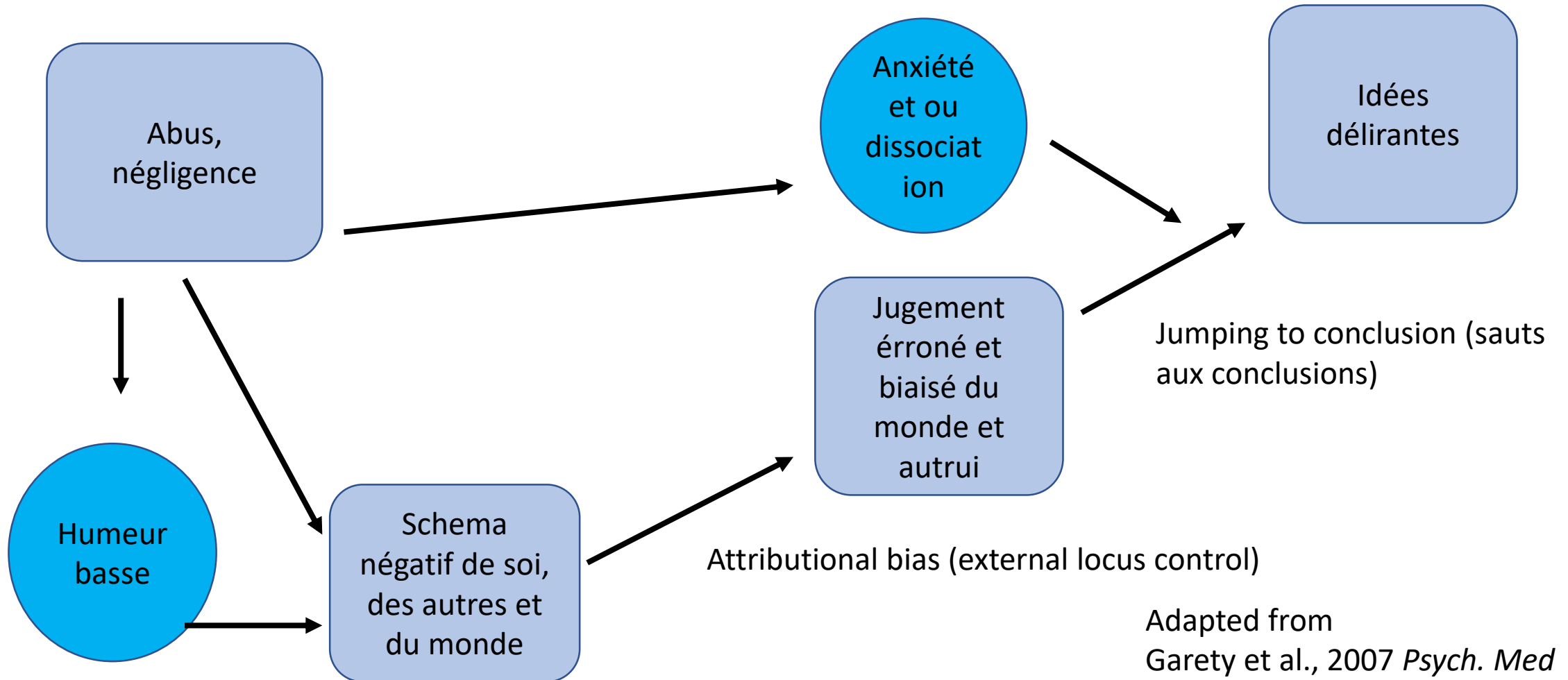
Shanghai Archives of Psychiatry, 2015, Vol. 27, No. 2

**Figure 1. Modelling psychosis symptoms:
topographical model of psychosis symptoms**



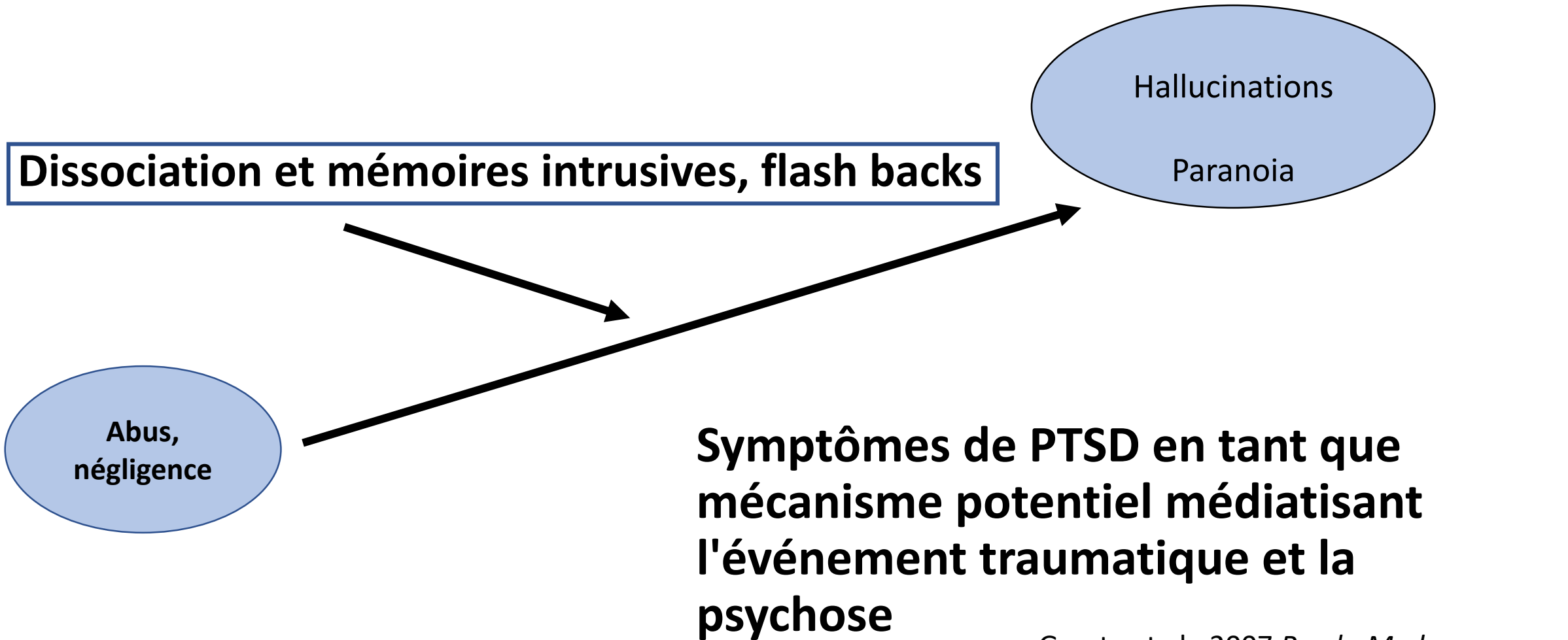
L'influence des facteurs sociaux dans la psychose est significativement médiatisée (expliquée) par les symptômes non psychotiques, en particulier les symptômes de l'humeur et d'autres domaines de l'affect tels que l'anxiété ou la dissociation, ainsi que des biais cognitifs

Model intégré (cognitive et affective)



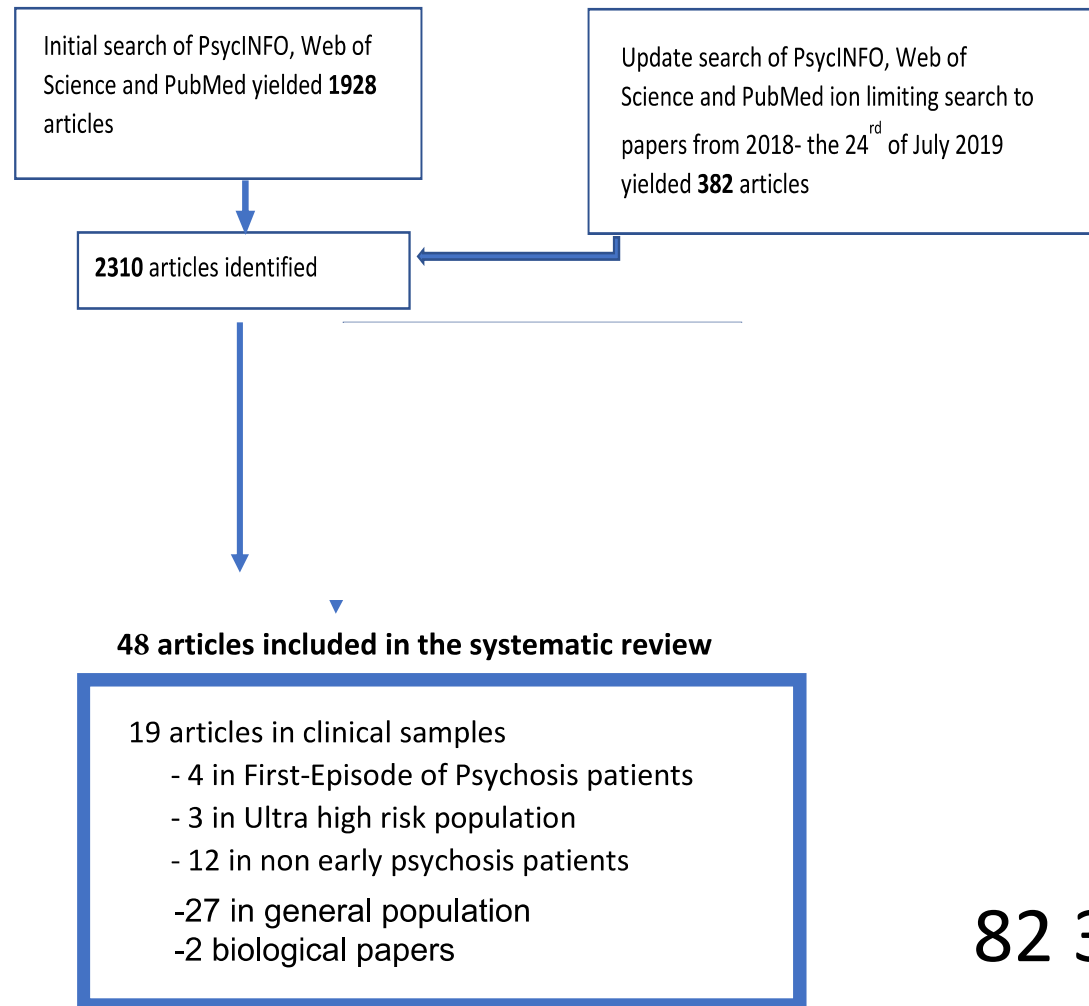
Adapted from
Garety et al., 2007 *Psych. Med*
Howes O. & Murray R. 2014 *lancet*

Implication des symptômes PTSD



Garety et al., 2007 *Psych. Med*
Ross et al., 2009 (Greenleaf Book Group)

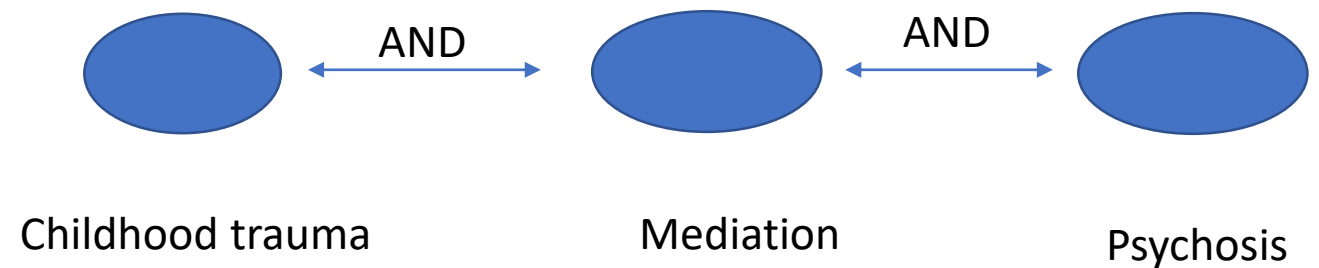
Figure 1. Flow chart



A systematic review on mediators between adversity and psychosis: potential targets for treatment

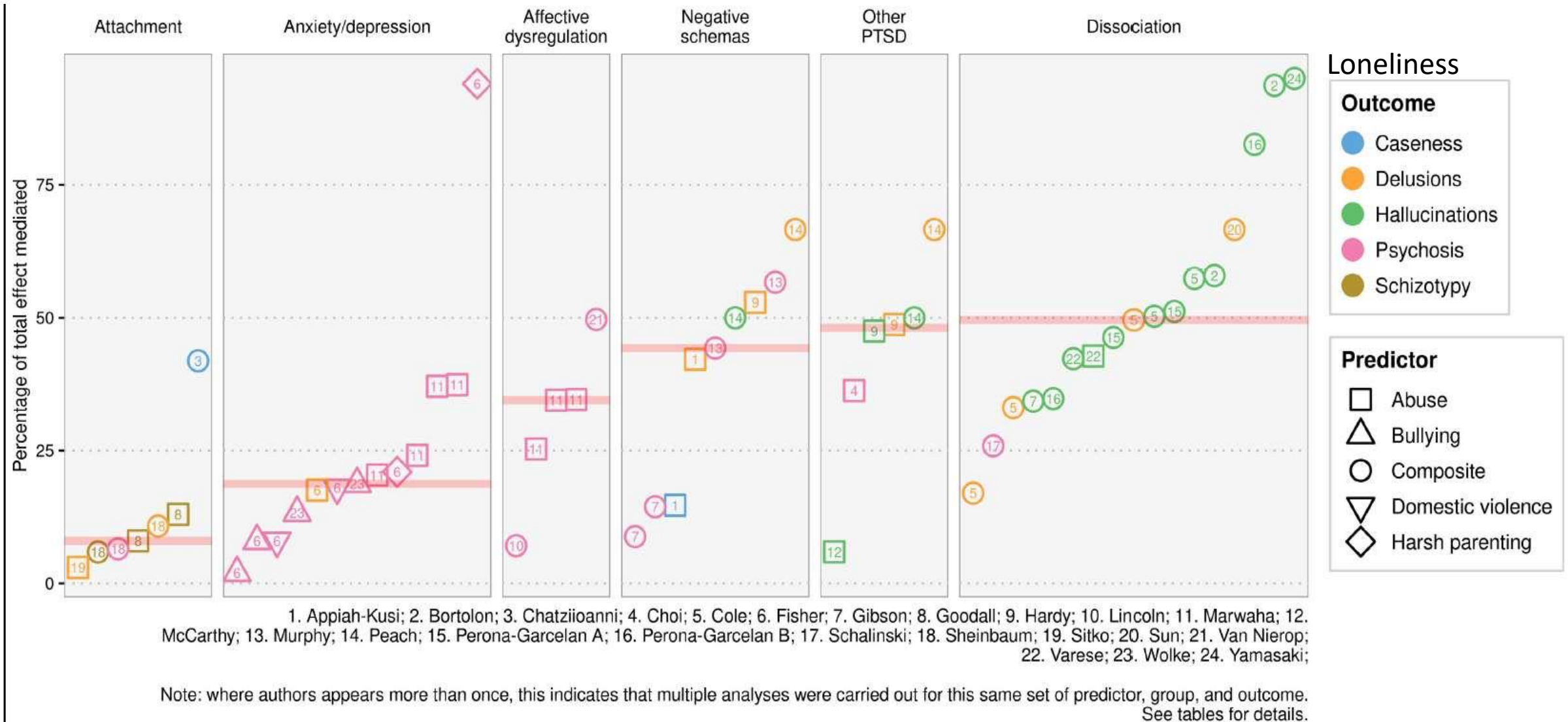
Luis Alameda^{1,2,3,4} , Victoria Rodriguez¹, Ewan Carr⁵, Monica Aas^{1,6}, Giulia Trotta¹, Paolo Marino¹, Natasha Vorontsova⁷, Andrés Herane-Vives^{8,9}, Romaine Gadelrab⁸, Edoardo Spinazzola^{1,10}, Marta Di Forti^{1,11}, Craig Morgan¹² and Robin M Murray¹

Psychological Medicine 2020 Sep;50(12):1966-1976)

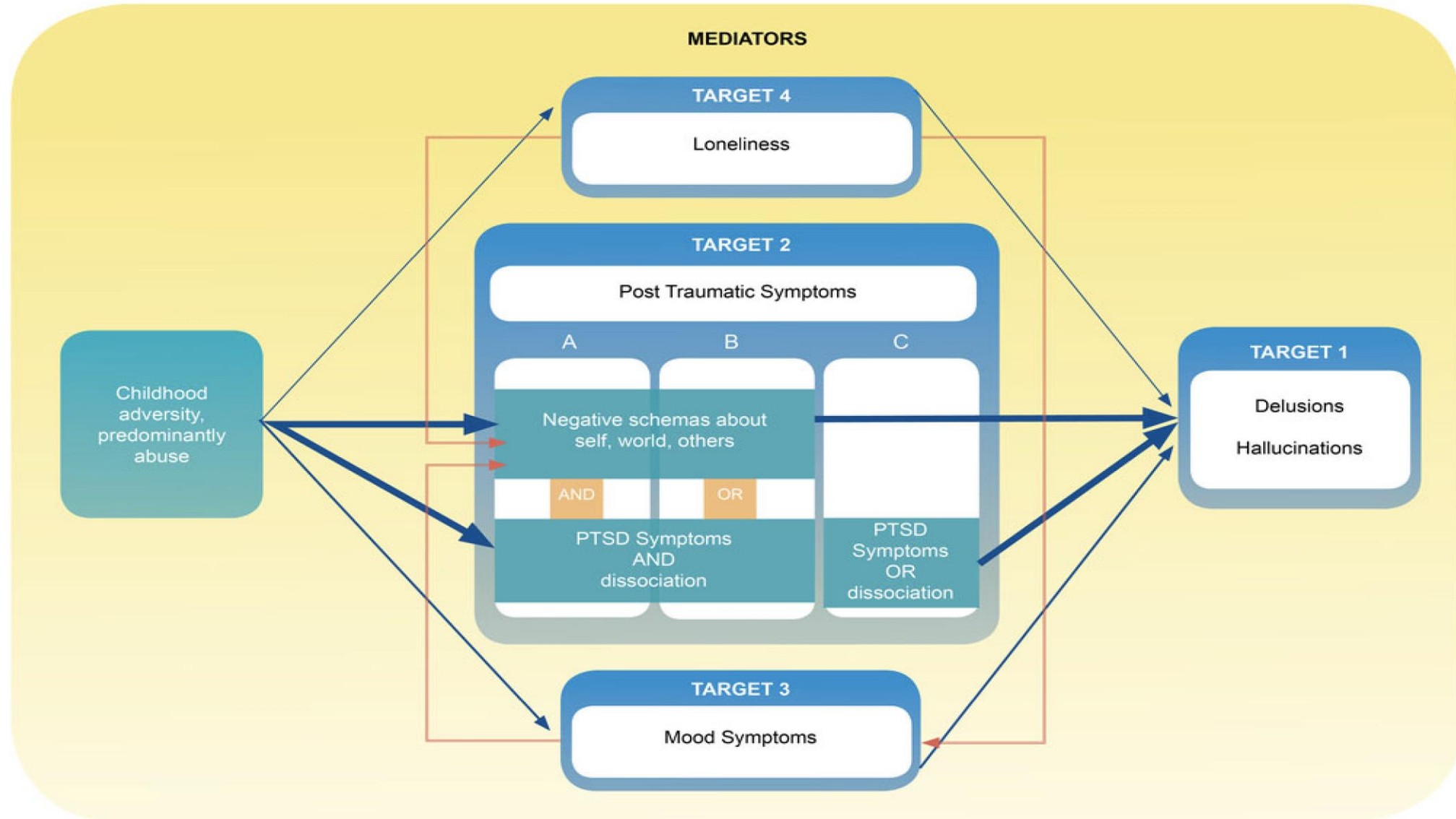


82 352 subjects from GP and 3189 from clinical studies

Percentage de la association entre trauma et psychose expliquée



Cibles potentielles pour des patients psychotiques traumatisés



La maltraitance est liée à des symptômes positifs, tandis que la négligence est liée à des symptômes négatifs, suggérant des voies/mécanismes spécifiques.

Toute forme d'adversité est associée à une plus grande sévérité des symptômes dépressifs.

Les liens entre l'adversité et la psychose sont partiellement médiatisés par la dissociation, les symptômes du PTSD, les schémas négatifs sur soi-même, le monde et les autres, et des niveaux élevés de dépression et d'anxiété.

Ces médiateurs (**non-psychotiques**) doivent être systématiquement évalués chez les patients atteints de psychose. Les traiter avec des moyens thérapeutiques spécifiques **pourrait** être un complément utile à celui du traitement direct des symptômes psychotiques.

Questions?

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