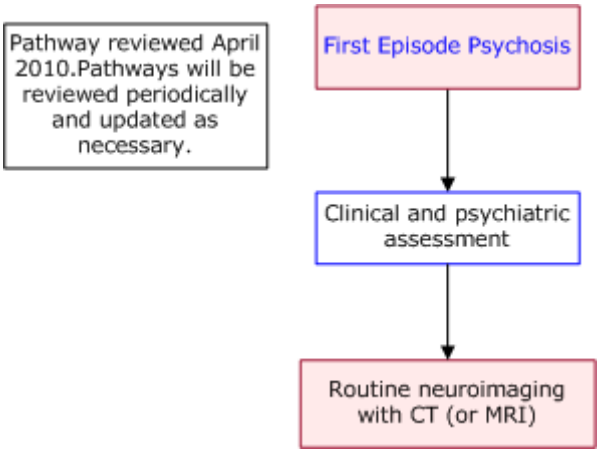

FIRST EPISODE PSYCHOSIS

- Routine neuroimaging for patients presenting with first episode psychosis has been recommended by the Royal Australian and New Zealand College of Psychiatrists (RANZCP).1
- Imaging can enhance the confidence of the diagnosis and provide information that is relevant to treatment planning and prognosis. 2
- Patients with first episode psychosis have been shown to have structural abnormalities compared with controls subjects including:
    - an increased prevalence of an abnormal (>6mm) cavum septum pellucidum 3-5
    - decreased cerebral volume 6-8
    - increased ventricular system volume, especially in the lateral and third ventricles 6,7
    - decreased hippocampal volumes 6,7
- In addition, chronic schizophrenia has been shown to be associated with: 6
    - decreased volume of the amygdala
    - increased volume of the basal ganglia
- Studies have reported conflicting results about the usefulness of routine imaging. Recent studies have failed to show significant yield for CT scanning in patients in whom referral was made for screening purposes only (eg. no focal neurological signs/symptoms).9-12 Others have reported significant rates (6.5 – 15%) of detecting clinically important findings using MRI, but did not indicate the yield in patients undergoing imaging for routine screening. 13,14
- Some authors have recommended MRI in preference to CT due to the subtle nature of the neuropathological findings in schizophrenia. 1,2

- Evidence that routine imaging alters outcome or clinical management is currently not available.

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Website

For more information go to www.imagingpathways.health.wa.gov.au

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