

TRANSDIAGNOSTIC STRUCTURE OF **AFFECTIVE** AND **Non-AFFECTIVE** PSYCHOSIS SYMPTOMS

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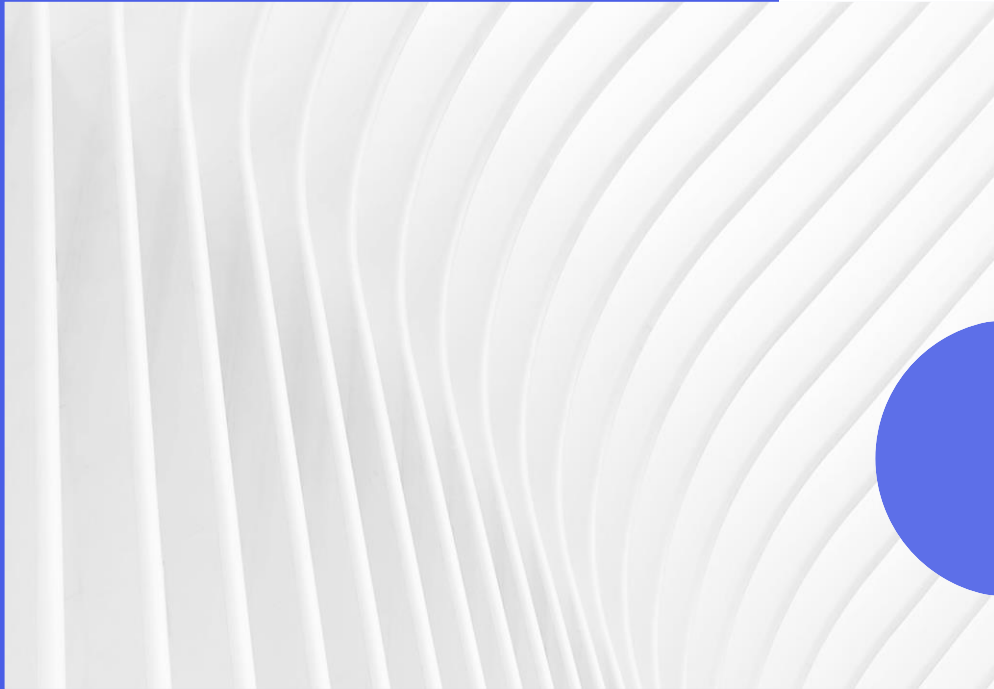
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INTRO



- Previous work on psychosis symptoms has largely **emphasized schizophrenia** and other primary psychotic disorders
- However, **mood dysregulation** such as depression and mania often has psychotic features (i.e., “affective” psychosis)
- Research is needed to examine the joint **structure of affective and psychotic** symptoms in transdiagnostic samples



CURRENT THEORY

Pentagonal Model (from the PANSS)

- Positive Symptoms
- Negative Symptoms
- Disorganization
- Depression
- Mania

Psychoticism Model (from the PID-5)

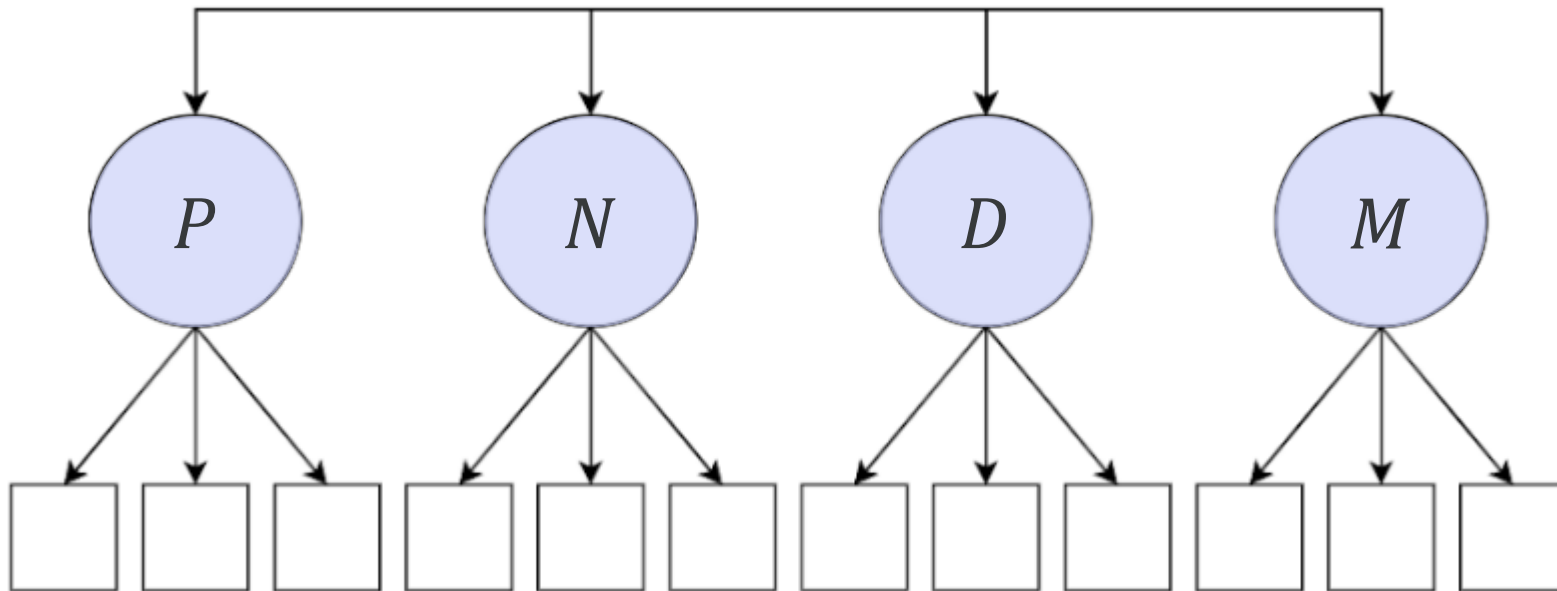
- Unusual Beliefs & Experiences
- Perceptual Dysregulation
- Eccentricity



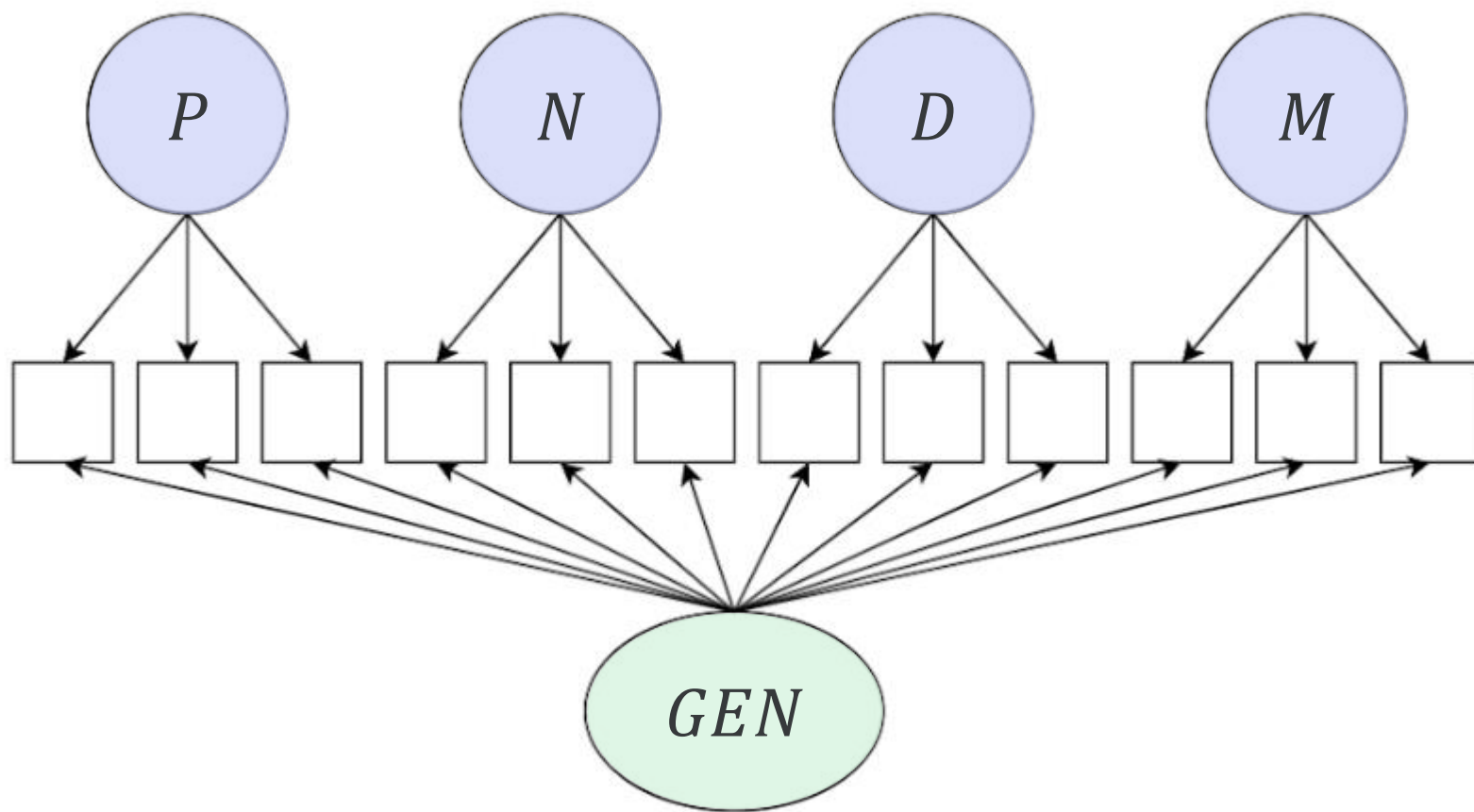
HOW SHOULD WE MODEL PSYCHOSIS?

CORRELATED, BIFACTOR, OR TRIFACTOR

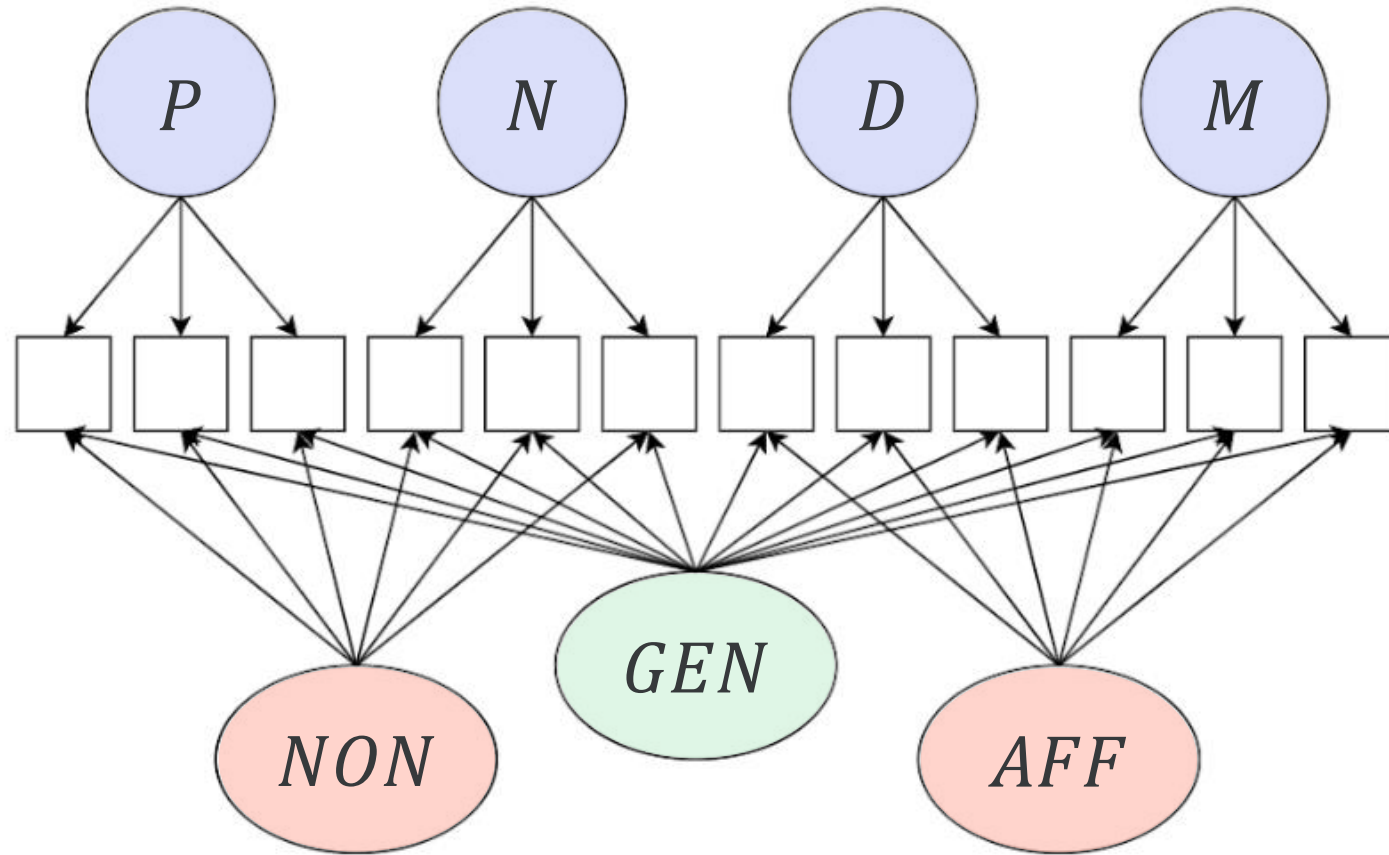
CORRELATED



BIFACTOR



TRIFACTOR





EMPIRICAL STUDY AND COMPARISON

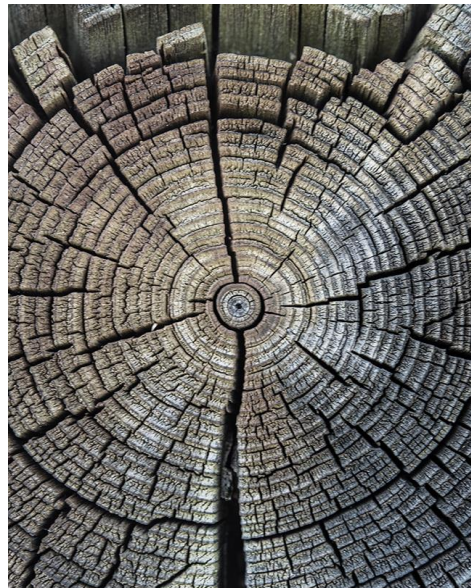
DATA, METHODS, AND RESULTS

PATIENTS WITH PSYCHOSIS



Sample

N = 1,042



Age

M = 36.3 (SD = 12.9)



Sex

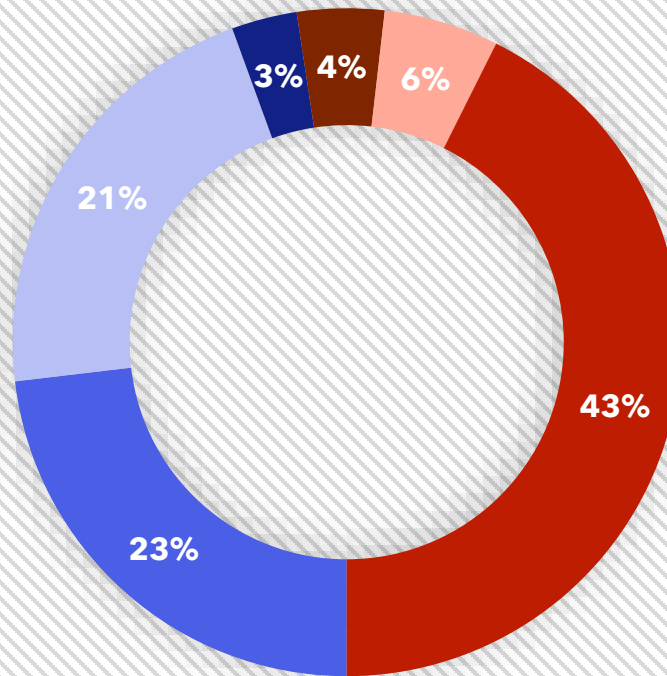
56% Male, 44% Female



Race

61% White, 30% Black

PRIMARY DIAGNOSES



■ Schizophrenia ■ Schizoaffective ■ Psychosis NOS ■ Other ■ Depressive ■ Bipolar

CLINICAL MEASURES



POSITIVE

- PANSS Positive (7 Items)
 - Delusions
 - Disorganization
 - Hallucination
 - Grandiosity
 - Suspiciousness



NEGATIVE

- PANSS Negative (7 Items)
 - Blunted Affect
 - Emotional Withdrawal
 - Poor Rapport
 - Lack of Spontaneity
 - Stereotyped Thinking



AFFECTIVE+

- PANSS General (16 Items)
 - Anxiety, Guilt, ...
- MADRS (10 Items)
 - Depression
- YMRS (11 Items)
 - Mania

ANALYSIS



1



Split the data into **discovery** and **validation** sets for cross-validation

2



Explore item structure using PA, BA, EFA, and CFA in discovery set

3



Propose models with all three structures based on discovery set

4



Compare models on fit and coherence in validation set

5



Test criterion validity of our favorite model in validation set

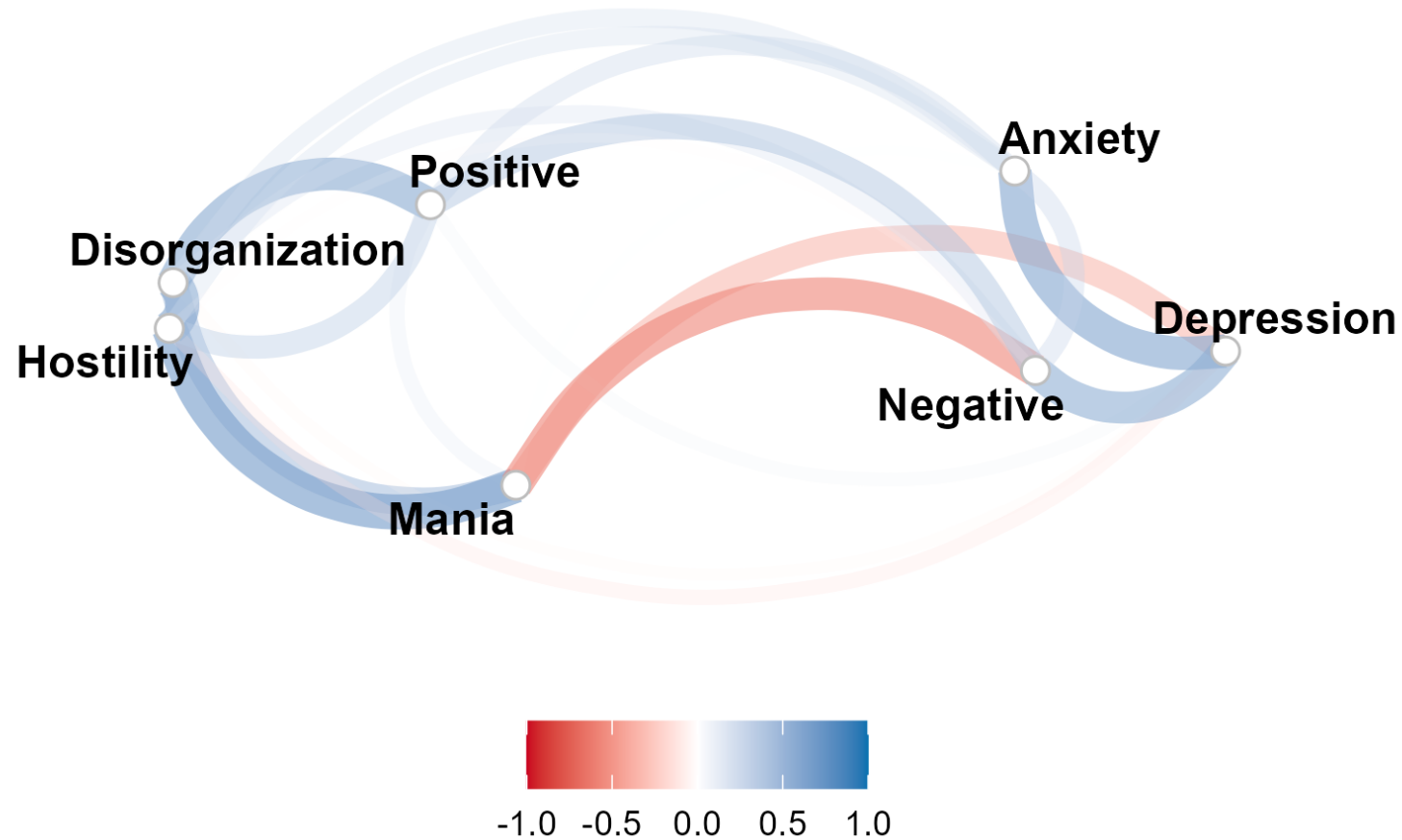
EFA MODELS IN DISCOVERY

Factors	PA Obs.	PA Sim.	RMSEA	CFI
5	.606	.424	.056	.894
6	.486	.387	.049	.923
7	.377	.359	.044	.941
8	.231	.329	---	---

SEVEN-FACTOR MODEL

Positive	Delusions, Suspiciousness, Thought content, Hallucinations
Negative	Emotional & Social withdrawal, Blunted affect, Speech flow, ...
Disorganization	Conceptual disorganization, Poor attention, Language
Mania	Elevated mood, Speech, Activity, Excitement, Grandiosity, ...
Depression	Sadness, Inability to feel, Lassitude, Suicidal thoughts, ...
Hostility	Hostility, Irritability, Impulse Control, Uncooperativeness
Anxiety	Inner tension, Anxiety, Tension

FACTOR CORRELATIONS

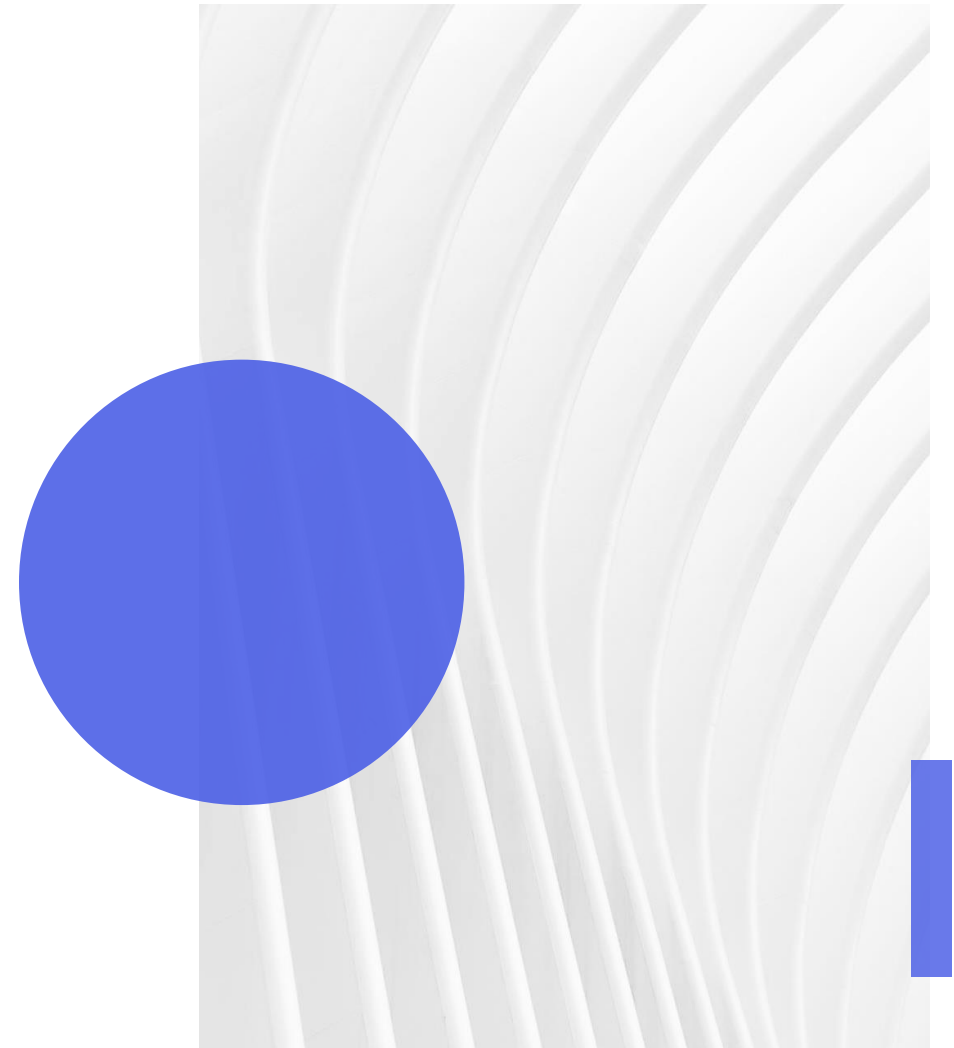


CFA MODELS IN VALIDATION

Model	BIC	RMSEA	CFI	Coherence
Correlated (7)	27452	.061	.956	High
Bifactor (1+7)	28022	.081	.923	Low
Trifactor (1+2+7)	27824	.059	.964	Low

CONCLUSIONS

- We found a **more complicated structure** than previous work by recruiting a transdiagnostic sample and including affective items with the PANSS items
- There was **not much support for a general factor** of psychosis in this sample and collection of items
- We found an **unexpected pattern of correlations** that did not match affective vs. non-affective clusters
- Our results **elucidate the structure** of symptom components and traits under the HiTOP Thought Disorder spectrum and the HiTOP Mania subfactor
- **New instruments may be needed** for psychosis





THANK YOU!

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