How shall we take care of Schizophrenia today?

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This talk is about specificity of schizophrenia care with the evolution of these last years although future research is necessary to improve the quality of life of these patients. It’s necessary now not to associate schizophrenia diagnosis or psychosis with patients with briefs psychosis phase or chronics psychiatric patients. First, psychosis term with the difficulties to do it will be defined. Then, we refer to the classification international criterion of DSMV and CIM 10 and the fact that they are not completely the same. Their limits are that they never give back the subjectivity of each subject and forget that each subject is an isolate case. To give illustrations of these limits, we define the frequent case of brief psychosis, it can be an isolated episode in a life or not, sometimes, the evolution is the chronic illness. We give a second illustration of this limit with the discovery of neuroleptics, when for the first time, positive symptoms of psychosis disappeared and when we can first try to help them in the real life. This article tries to give his importance to cognitive approach as a new definition then of psychotic disorders. The question is how to help them to adapt their cognition with the society and how to help them to compensate for their deficits. We describe how can help neuropsychological tests and standardized programs in this way. We describe more precisely RECOS, CRT, IPT, and Rehacom® programs with the necessity of a personal accompaniment. Then, cognitive rehabilitation in addition to pharmacology is supplementary. We present the complement of psychodynamic approach with the care of narcissism’s subject in an individual relation with a therapist and we finish with the difficult problem of the family, or to associate them to the care of patient if it’s possible, or to protect patient of a pathologic family. Explain them the troubles are essential but it depend on singularity of each subject in his own culture and his own family history. The risk of stigmatization is often the price of chronic patients. In fact, we would like to think that cognitive approach with humanist approach is today the best way to cure schizophrenia and psychosis as an illness.

Biography

Laurence Lacoste has completed her PhD at the age of 32 years from Nanterre University in France and Postdoctoral studies from INSERM. She has worked in reputed Hospital in Paris as psychologist and as teacher in reputed French University. Now, she works as liberal psychologist and for the ethical research committee of Saint Louis Hospital in Paris. She has published more than 10 papers in reputed journals of medicine and psychology.

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