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Schizophrenia: manifestations, incidence and course in different cultures
A World Health Organization
Ten-Country Study

by A. Jablensky, N. Sartorius, G. Ernberg, M. Anker, A. Korten, J. E. Cooper,

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Schizophrenia: manifestations, incidence and course in different cultures A World Health Organization Ten-Country Study

This monograph presents the findings of a WHO Collaborative Study on the Determinants of Outcome of Severe Mental Disorders (DOS). The study was designed to investigate further some of the findings of the WHO International Pilot Study of Schizophrenia (IPSS) which produced the unexpected finding that patients suffering from schizophrenia in the centres in developing countries appear to have a more favourable outcome at both two and five years follow-up than initially similar patients in centres in developed countries. The DOS was carried out in field centres in Aarhus (Denmark), Agra and Chandigarh (India), Cali (Columbia), Dublin (Ireland), Honolulu and Rochester (United States of America), Ibadan (Nigeria), Moscow (USSR), Nagasaki (Japan), Nottingham (United Kingdom), and Prague (Czechoslovakia). Six of these centres had also taken part in the IPSS.

One of the major achievements of the IPSS had been the demonstration that large-scale cross-cultural studies using standardized methods of interviewing, symptom rating and diagnosis are possible. The study reported here rested upon the same methodological foundations but used an epidemiological approach. In each of the twelve centres of the DOS, all individuals from a defined catchment area making a lifetime first contact with specified psychiatric, medical or other agencies because of symptoms of a possibly schizophrenic illness were identified, assessed, and followed up for two years.

The finding of a better outcome of patients in developing countries was confirmed, as was the existence of a substantial proportion of patients (often more than half) with undoubted initial schizophrenic symptoms but a good outcome at two years. About one-third of all patients in the study were never admitted to a psychiatric hospital, and of those that were admitted the majority were in hospital for only short periods.

The Study also produced evidence about the incidence rates of schizophrenia. Significant differences were found between centres in the incidence of schizophrenia using a broad definition, although the rates ranged only from 1.5 to 4.2 per 100 000 population aged 15–54. In contrast, the incidence of schizophrenia using a narrow definition based on the presence of a limited number of 'classical' symptoms in the present mental state (category S+ of the CATEGO program derived from the PSE-9 interview) was not significantly different between centres.

This study confirms that schizophrenic illnesses are ubiquitous, appear with similar incidence in different cultures and have clinical features that are more remarkable by their similarity across cultures than by their difference. They are illnesses with variable outcomes which are more favourable in the developing countries and depend on genetic, developmental and environmental influences whose exact nature, interaction and relative importance have yet to be identified.

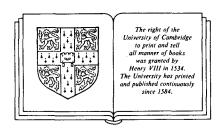
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