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THE KRAPELLENIAN DICOTOMY IN TERMS OF EMPLOYMENT OUTCOMES

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Background: We decided to examine the employment status of all patients with Schizophrenia actively treated by the Bedford East CMHT and compare this to the employment status of all those in the team who suffered from Bipolar Affective Disorder.

Methods: Cases of Schizophrenia and Bipolar Disorder were anonymously identified from a database held by the team and their employment status was established.

Results: 124 patients were identified with schizophrenia, 24 with Schizoaffective disorder, and 60 with Bipolar Disorder .

Of the Schizophrenia patients, 91 (73.38%) were unemployed, 15(12%) were employed, 10 (8%) were in voluntary employment and 8 (6.45%) were labelled 'other' [housewife, student etc].

Of the Bipolar patients, 32 (53.33%) were unemployed, 14(23%) were employed, 5 (8.3%) were in voluntary employment and 9 (15%) were labelled 'other'

Of the Schizoaffective patients, 15 (62.5%) were unemployed, 4 (16.66%) were employed, 2 (8.33%) were in voluntary employment and 3 (12.5%) were labelled 'other'.

Discussion: Employment Outcomes for serious mental illness were poor , however Schizophrenia patients had a lower chance of returning to employment, partly due to the heterogeneity of the condition. Bipolar patients had twice the chance of gainful employment as Schizophrenic ones.

Conclusion: It is particularly difficult to achieve employment for patients with serious mental illness. This adds to the recently made argument for a more assertive approach by the creation of ad hoc chronic psychosis teams who could give ongoing support to aid patients to return to social inclusion and possibly work.