

ABSTRACT

AIM: The aim of this study was to determine, if any, the factors associated with relapse with a view to provide guidelines for prevention, early identification and management of relapse in a community setting.

METHOD: The study is a retrospective record review of the patients attending seven randomly selected Community Mental Health Clinics in Southern Gauteng during the period January 1995 to June 2005. Two hundred and seventeen (217) patients aged 18 years with a diagnosis of schizophrenia were included in the study. Patients were excluded if the diagnosis of schizophrenia was made in the preceding six months of the study. Demographic and clinical variables including age, gender, marital status, source of income, highest level of education, non compliance, presence of substance abuse, co-morbid psychiatric condition, the presence and number of relapses and stressful life events were recorded on a data schedule.

RESULTS: Two hundred and seventeen patients records were analysed: 61.8% have had at least one relapse. The only factors that provided a significant predictive factor for relapse included non compliance due side-effects, non compliance due to lack of insight, and the presence of depressive symptoms. 64.2% of the study population were non compliers and 27.1% have had depressive features. Demographic variables were not associated with relapse.

CONCLUSION: These findings imply that interventions aimed at reducing relapse in schizophrenia should include improving medication compliance and early detection and treatment of depression.