

Rehabilitation and Cognitive Impairments in People with Psychosis-Prone Mental States

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Introduction

Psychosis-prone mental states, such as prodromal or at-risk mental states, are characterized by subtle symptoms and experiences that precede the onset of full-blown psychotic disorders. Individuals in these states often exhibit cognitive impairments that impact their daily functioning and overall quality of life. Rehabilitation approaches tailored to address cognitive impairments in people with psychosis-prone mental states have gained increasing attention. This article aims to provide an introduction to the topic of rehabilitation and cognitive impairments in individuals with psychosis-prone mental states, exploring the challenges faced and the potential benefits of targeted interventions [1].

Description

People with psychosis-prone mental states often experience a range of cognitive impairments, including deficits in attention, memory, executive functions, and social cognition. These impairments can significantly impact various aspects of their lives, including academic or occupational performance, social relationships, and independent living skills. Understanding and addressing these cognitive impairments is crucial for early intervention and prevention efforts in psychosis. Rehabilitation approaches offer a potential avenue to mitigate the impact of cognitive impairments in individuals with psychosis-prone mental states. Cognitive remediation, a form of rehabilitation, focuses on improving cognitive abilities through targeted exercises, computer-based training, and cognitive strategies. This approach aims to enhance attention, memory, problem-solving skills, and social cognition, with the ultimate goal of improving overall functioning and reducing the risk of transition to full-blown psychosis [2,3].

In addition to cognitive remediation, psychosocial interventions play a vital role in the rehabilitation process. Social skills training, supported employment programs, and psycho education can help individuals develop coping mechanisms, improve social interactions, and enhance their understanding of their condition. These interventions provide practical skills and knowledge necessary for managing cognitive impairments and maximizing functional outcomes. However, several challenges exist in implementing rehabilitation programs for individuals with psychosis-prone mental states. Early identification and accurate diagnosis of individuals at risk for psychosis can be complex, as symptoms may be subtle and overlapping with other mental health conditions. Additionally, engagement and motivation can be barriers to participation in rehabilitation programs, as individuals in prodromal states

may not fully recognize the significance of their cognitive impairments or the potential benefits of interventions [4].

While rehabilitation holds promise, there are challenges in implementing these programs for individuals with psychosis-prone mental states. Early identification and accurate diagnosis of individuals at risk for psychosis can be complex, as symptoms may be subtle and overlap with other mental health conditions. Engaging individuals in prodromal states and motivating them to participate in rehabilitation programs can also be challenging, as they may not fully recognize the significance of their cognitive impairments or the potential benefits of interventions. Furthermore, individualized and person-centered approaches are essential when implementing rehabilitation programs for this population. Tailoring interventions to meet the specific needs and preferences of individuals can enhance engagement and adherence to the program. Flexibility and adaptability in program delivery, such as incorporating technology-based interventions or offering community-based services, can also improve accessibility and engagement [5].

Conclusion

Rehabilitation programs tailored to address cognitive impairments in individuals with psychosis-prone mental states offer promising avenues for early intervention and prevention efforts. Cognitive remediation and psychosocial interventions provide strategies to enhance cognitive abilities, improve functioning, and mitigate the risk of transitioning to full-blown psychosis. However, challenges in early identification, accurate diagnosis, and engagement must be addressed to effectively implement rehabilitation approaches. Further research is needed to refine and optimize rehabilitation programs for individuals with psychosis-prone mental states. Long-term follow-up studies are necessary to determine the effectiveness and durability of cognitive remediation and psychosocial interventions in improving functional outcomes and preventing the onset of psychosis. Collaborative efforts between mental health professionals, researchers, and individuals with lived experience are crucial for developing and implementing comprehensive rehabilitation programs that address the specific needs of this population. Overall, rehabilitation programs offer hope in improving the lives of individuals with psychosis-prone mental states by targeting cognitive impairments and promoting functional recovery. By addressing cognitive deficits early in the course of illness, it may be possible to reduce the long-term impact of psychosis and enhance overall quality of life for these individuals.

References

1. Kanie, Ayako, Akiko Kikuchi, Daisuke Haga and Yuki Tanaka, et al. "The feasibility and efficacy of social cognition and interaction training for outpatients with schizophrenia in Japan: A multicenter randomized clinical trial." *Front Psychiatry* 10 (2019): 589.
2. Choi, Jimmy, Cheryl M. Corcoran, Joanna M. Fiszdon and Michael Stevens, et al. "Pupillometer-based neurofeedback cognitive training to improve processing speed and social functioning in individuals at clinical high risk for psychosis." *Psychiatr Rehabil J* 40 (2017): 33.
3. Nemoto, Takahiro. "Anxiety symptoms in early psychosis and achievement of recovery." *Psychiatry Clin Neurosci* 76 (2022): 543-543.

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4. Pantelis, Christos, Dennis Velakoulis, Patrick D. McGorry and Stephen J. Wood, et al. "Neuroanatomical abnormalities before and after onset of psychosis: A cross-sectional and longitudinal MRI comparison." *Lancet* 361 (2003): 281-288.
5. Loewy, Rachel, Melissa Fisher, Danielle A. Schlosser and Bruno Biagiante, et al. "Intensive auditory cognitive training improves verbal memory in adolescents and young adults at clinical high risk for psychosis." *Schizophr Bull* 42 (2016): S118-S126.

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