

## THE KU LEUVEN METAFORUM EXPERIENCE



The KU Leuven Metaforum was founded in 2008 and comprises multidisciplinary groups that aim to make scientific expertise on societal issues available to policymakers and the general public. The members of the Metaforum contribute to well-informed discussions and debate based on their own knowledge and expertise, with a strong focus on an interdisciplinary approach.

In April 2018 KU Leuven organised a Metaforum on the 'Societal aspects of dementia' from the perspective of the quality of life, the public image of dementia, the organization and financing of health care, the legal position of people with dementia, new housing arrangements, etc. I was invited to be part of this Metaforum chaired by Professor Erik Schokkaert.

It was an extremely worthwhile experience and it broadened my understanding of dementia as well as helped me identify potential areas where I could focus my research going forward. The discussions held every week with international experts belonging to various disciplines such as philosophy, anthropology and law were enriching and lively.

Lectures by experts in the field of dementia like Professors Martin Rossor, Kostas Lyketos and Martin Knapp on the varied clinical presentation of dementia, dementia care and cost and policy implications were presented to the members of the Metaforum and the wider scientific community at Leuven every week. These lectures were held in the Leuven Hospital and other colleges thus providing us with an opportunity to familiarize ourselves with the academic structure and medical care in Leuven. I also had the opportunity to present the epidemiological work done by the IMH Research Division on dementia to the fellow members, students and the general public on separate occasions and these talks were well received. The highlight of the trip was a visit to Bruges where we were introduced to 'Foton', a charity with core expertise in dementia, to promote awareness, support and care for those with dementia in Bruges. We were extremely honoured to meet the mayor of Bruges who



emphasised the commitment of the city to be inclusive and dementia friendly.

The take home message from the Metaforum was that while a cure seems unlikely in the immediate future, a holistic and multidisciplinary approach can ensure the mental and social health of persons with dementia. The discussions will be summarized as a position paper and there are suggestions to create a multi-media presentation that can be shared with a wider audience.

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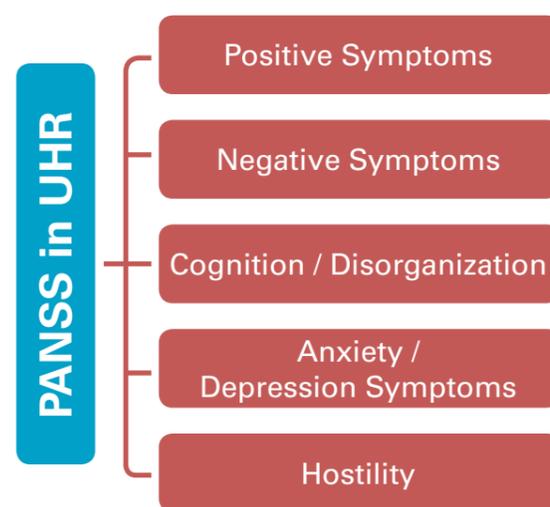
## FACTOR STRUCTURE OF THE POSITIVE AND NEGATIVE SYNDROME SCALE (PANSS) IN PEOPLE AT ULTRA HIGH RISK (UHR) FOR PSYCHOSIS

The Positive and Negative Syndrome Scale (PANSS) is a comprehensive psychopathology assessment scale. Its factor structure has been robustly demonstrated in populations with schizophrenia. In recent years, it has also been used in the Ultra-High-Risk (UHR) population. The UHR population defines a group of individuals with attenuated psychotic symptoms and some degree of functional impairment. However, no study has examined the dimensional structure of PANSS in UHR, which hinders the understanding and measurement of clinical symptom dimensions manifested in people with UHR. This paper aimed to examine the dimensional structure of the PANSS in a UHR sample. The study sample consisted of a group of participants with UHR (n = 168) from the Longitudinal Youth at Risk Study

(LYRIKS). LYRIKS is a prospective, observational study assessing the risk factors of psychosis. The participants were evaluated on PANSS, the Comprehensive Assessment of At-Risk Mental States (CAARMS), Calgary Depression Scale for Schizophrenia (CDSS), Beck Anxiety Inventory (BAI), Brief Assessment of Cognition in Schizophrenia (BACS), and Global Assessment of Functioning (GAF).

We performed exploratory factor analysis (EFA) to identify the PANSS factorial structure and five symptom factors were derived, including Positive, Negative, Cognition/Disorganization, Anxiety/Depression, and Hostility. This 5-factor solution showed good concurrent validity as shown by the strong associations between the PANSS positive factor and the CAARMS composite score, PANSS mood factor with depression and anxiety score, as well as the PANSS cognitive/disorganization factor with cognitive performance measured by BACS. Among the five factors, positive symptoms, negative symptoms and anxiety/depression factors were the factors that were associated with functioning. UHR individuals who had more severe positive, negative and mood symptoms had lower level of functioning.

To the best of our knowledge, this is the first paper reporting on the PANSS factor structure in UHR individuals. The 5-factor PANSS model demonstrated good construct validity and



is associated with functioning. The present PANSS factorial structure can be adopted in research studies or in a clinical setting to comprehensively evaluate psychopathology along dimensions in the UHR population.

More information about the study can be found at: <https://www.sciencedirect.com/science/article/pii/S0920996418302810>

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