

Assessment of affective blunting versus other schizophrenic symptomatology

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The aim of this work was to study affective blunting or flattening in schizophrenic patients. Forty-five schizophrenic patients were included in this study and underwent clinical evaluation and scaling procedures that included socioeconomic status, premorbid adjustment, negative and positive symptoms, depression, soft neurological signs and cognitive functioning. They were followed up as outpatients with maintenance antipsychotics for one-year stabilization period. The SANS-subscale for affective blunting showed tendency to measure only the lack of modulation of affect. The results showed that the affective blunting was found belonging to the negative symptom domain and independent from depression, positive symptoms and incongruity of affect. There was a step-down of affective blunting from the acute episode to post episode with opposite course through the stabilization period. At the index episode, the younger age at onset, poor premorbid adjustment, social poverty, excess neurological signs and cognitive deterioration showed contributions to the future stable affective blunting. Only poor premorbid adjustment and delusions were found contributing to the unstable affective blunting.