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Early intervention in psychosis

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First-episode psychosis

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- ❑ Affects about 15,000 people a year in England, most aged 15-35
- ❑ Unequivocal evidence that a delay in providing treatment leads to poorer outcomes over the lifetime
- ❑ EIP teams introduced from 2000 but on a limited scale and spending fell by 26% between 2010/11 and 2014/15
- ❑ Current provision supports c.5,500 new cases a year, with evidence of long waits in some areas

Schizophrenia

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- ❑ Less than 20% recover fully after an initial episode, with remainder at high risk of experiencing multiple episodes of severe illness over many years
- ❑ Rate of relapse is around 3.5% a month, at a cost to the NHS of nearly £20,000 per episode
- ❑ Only about 7% of people with schizophrenia are in paid employment (national average = 70%)
- ❑ Annual average cost to society = c£60,000 per case, including £36,000 to the public sector

Effectiveness of early intervention

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- ❑ Strong evidence that EIP is effective across all service, clinical and social outcomes at post-treatment follow-up
- ❑ Outcomes include: reduced use of inpatient care, lower risk of relapse, lower risk of suicide, improved education and employment outcomes, better service engagement and higher levels of client satisfaction
- ❑ Recovery rate within two years of 52% compared with 15% with traditional CMHT support

Impact on health service costs

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- International studies show that for patients supported by an EIP service health service costs are lower by 20-50% compared with standard care for periods up to five years
- Lambeth study: EIP halves the probability of a compulsory admission in the first two months of psychosis and in each two-month period thereafter
- Cost savings per patient = £5,500 in the first year of psychosis and £15,700 during the first three years

Wider benefits

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- Evidence that employment rates among people supported by EIS are up to three times higher than among standard care patients
- EIS also effective in reducing the risks of both suicide and homicide
- Net benefits to society as a whole = £6,000 in the first year of psychosis and £21,500 over three years

Better outcomes at lower cost

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- From an NHS perspective, EIP services more than cover their costs within a year and over three years they generate savings of more than £3 for every £1 invested
- The provision of EIP services to all 15,000 people experiencing first-episode psychosis each year would require additional expenditure of £77 million a year with gross savings of £247 million a year, i.e. net savings of £170 million a year.