

# Scientists Identify Different Developmental Trajectories for Individuals with Schizotypal Traits

Schizotypy, defined as the personality organization underlying schizophrenia and other related mental disorders, is a critical construct for a broad range of scientific disciplines. Because schizotypy can be psychometrically identified in the general population, investigating schizotypy may provide a unique opportunity to better understand the underlying psychopathological process of psychosis while avoiding the confounding effect of antipsychotic medications and duration of the illness. However, most of the previous studies were limited to cross-sectional data and western-based samples, and very little is known about the trajectories of individuals with schizotypal traits and their corresponding emotional and social functioning.

A research team led by Raymond Chan from the Institute of Psychology, Chinese Academy of Sciences and their international collaborators have conducted a prospective longitudinal study to identify whether there would be latent groups of individuals with distinct trajectories of schizotypal traits, and whether these potentially identified groups of individuals would be characterized by unique behavioral, emotional and social functioning performances.

Using the Chapman scales, Chan and his team have successfully identified four latent groups with distinct trajectories in 1,541 college students. Latent class 1 (LC1) showed consistently low levels of schizotypy traits, whereas latent class 3 (LC3) showed persistently high levels of various schizotypy traits. Both latent

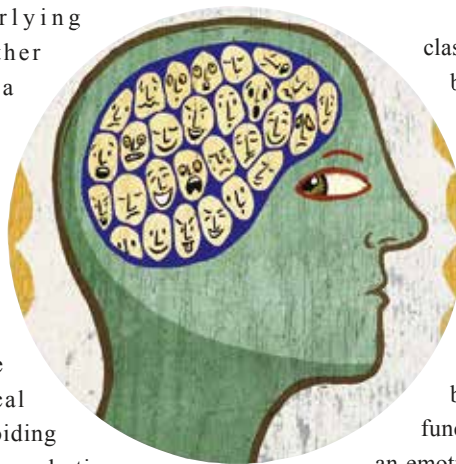


Illustration Works/Corbis.

classes 2 (LC2) and 4 (LC4) had low baseline schizotypy scores, which increased over time, in an abrupt way for LC2 and a more gradual way for LC4. These four groups were also distinguishable by their emotional and social functioning. LC3 had the worst emotional and social functioning outcomes. LC2 was characterized by declines in emotional and social functioning over time. LC4 displayed an emotional and social functioning profile that was comparable to LC1.

The findings suggested that there may be distinct developmental trajectories for schizotypy. Two groups may be of particular interest: the “stable high schizotypy” group (LC3) that displayed the worst clinical and functioning outcomes on almost all measures, and the “high reactive schizotypy” group (LC2) characterized by a relatively rapid decline in functioning.

These findings highlighted the importance of tracking schizotypy longitudinally because of their different trajectories and outcomes. It also suggested that the “stable high schizotypy” and the “high reactive schizotypy” groups may warrant clinical attention.

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