

**Aim:** to study the role of clinical and immunological changes in the pathogenesis of schizophrenia

**Material:**

- 60 patients (35 men and 25 women) with paranoid schizophrenia (F 20.0) (mean age  $34.75 \pm 7.59$  years);
- 30 health control participants

**Inclusion criteria:** age 18-55 y.o, not less than high school education

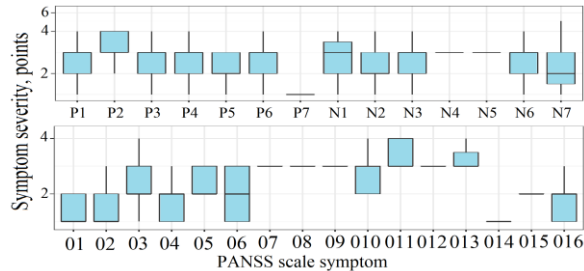
**Exclusion criteria:** organic brain disease, other verified comorbid somatic disease in acute phase

**Methods:**

- Follow-up method;
- Scales: CGI (general clinical impression), PANSS (positive and negative symptoms), BAC-S (cognition);
- Laboratory: ELISA, flow cytometry (assessment of T-lymphocyte subsets)
- Statistical

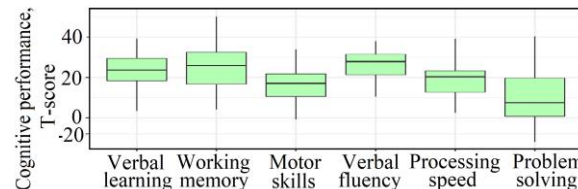
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## Characteristic of patients' mental state (PANSS)

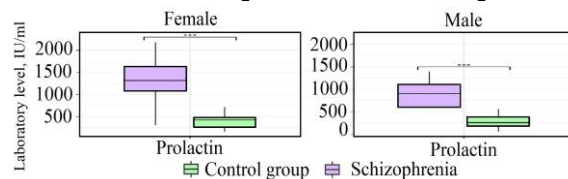


**Clinical picture:** thinking disorders, autism, negativism, low psychomotor speed, impaired attention, volitional impulses.

## Cognitive functioning of patients with schizophrenia (BAC-S) Norm is $\geq 40$ T-points

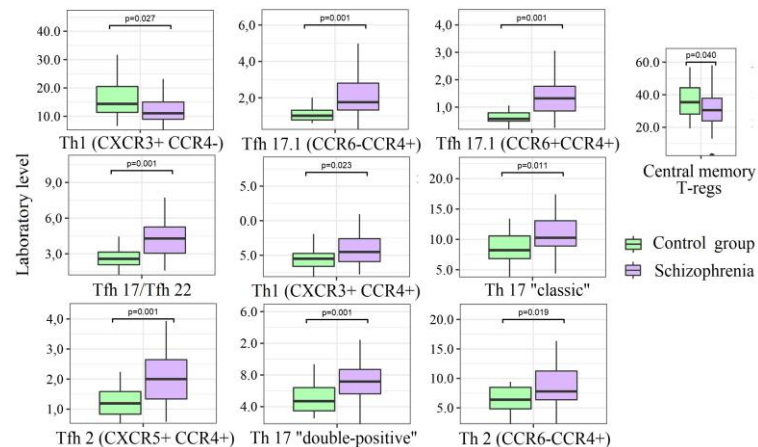


## Prolactin level in patients with schizophrenia



Hyperprolactinemia was present in 41.2% of patients (maximum - 2181.50 mIU/l) and high anti-thyroperoxidase and anti-thyroglobulin antibodies in 12% of patients.

## Immunologic profile of patients with schizophrenia



A high level of prolactin negatively affected memory function and correlated with some of Th17 and Tfh17 subsets levels.

**Conclusion.** Patients with schizophrenia may be characterized by presence of inflammatory process and high risk for autoimmunity.