



# Comparing outcomes following a first episode of psychosis in autistic and non-autistic people: a clinical retrospective study



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**BACKGROUND:** Autistic people are at increased risk of psychosis (3-4x). Autism is associated with poorer psychosis outcomes (symptomatic remission, multi-treatment failure, global functioning (1-4)).  
**AIM:** to characterise psychosis outcomes for autistic and non-autistic people.

**METHODS:** this study used clinical data from the Cambridgeshire and Peterborough NHS Foundation Trust Research Database (CPFTRD NHS REC approval 22/EE/0264) (Figure 1)

Study Cohort	Autism	Covariates	Community Service Use	Inpatient Service Use	Exploratory analysis
<ul style="list-style-type: none"> <li>Total N=7,049</li> <li>Coded psychosis diagnosis</li> <li>First diagnosis was taken at point of entry</li> </ul>	<ul style="list-style-type: none"> <li>N=224</li> <li>Coding of an 'F84' ICD-10 code (n=185)</li> <li>Awaiting autism assessment (n=39)</li> </ul>	<ul style="list-style-type: none"> <li>Age</li> <li>Sex</li> <li>Index of multiple deprivation</li> <li>Ethnicity</li> </ul>	<ul style="list-style-type: none"> <li>Early Intervention Services</li> <li>Liaison psychiatry</li> <li>FRS Phonenumber<sup>1</sup></li> <li>Crisis Teams</li> <li>Section 136<sup>2</sup></li> <li>Medication</li> </ul>	<ul style="list-style-type: none"> <li>Informal</li> <li>Under Mental Health Act (MHA)</li> <li>Psychiatric Intensive Care (PICU, males only)</li> <li>Out of Area</li> </ul>	<ul style="list-style-type: none"> <li>Grouping by learning disability (LD)</li> </ul>

Figure 1

## KEY FINDINGS (Table 1, Figure 2-3)



### Community Outcomes for Autistic People

Figure 2

- Higher lifetime rates of S136 police detention
- Higher FRS (emergency mental health phonenumber) contacts
- Fewer crisis team referrals



### Inpatient Outcomes for Autistic People

- More likely to be admitted after a psychosis diagnosis (adjusted hazard ratio 1.42 (95% confidence interval 1.08-1.88, p<0.05)).
- This trend is driven by informal admissions
- No differences in PICU admissions
- Higher rates of out-of-area placements



### Exploratory analyses (LD and Autism)

- LD-only and LD+autism groups had lower lifetime FRS and S136 utilisation, and fewer EIS contacts.
- LD patients had longer inpatient admissions
- There was no significant interaction between autism and LD in regressions of service outcomes.

## CONCLUSIONS

- Our data show different service use patterns between autistic and non-autistic people (particularly inpatient services, and some emergency services).
- LD also plays a key role in service use patterns.
- This agrees with the wider literature on autistic people in community and inpatient MH services (4-6)
- Replication in larger datasets is needed.

## References

- 1) Zheng et al. Autism Research. 2018.
- 2) Zheng et al. Early Interv Psych. 2021.
- 3) Downs et al. Journal Clin Psych. 2017.
- 4) Nikolic et al. BJPsych Bull. 2024.
- 5) Nisar et al. Journal ID Resaerch. 2025
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## Acknowledgments

We would like to thank our patient public involvement participants and those clinicians who participated in our engagement activities.

## Abbreviations

- <sup>1</sup>First Response Service—emergency mental health phonenumber
- <sup>2</sup>Police detention under Mental Health Act (MHA)
- <sup>3</sup>Early Intervention for Psychosis Services (EIS)

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	Non-autistic (N=7185)	Autistic (N=224)	P. Value
EIS <sup>3</sup> referrals (%)	1268 (17.6%)	46 (20.5%)	p = 0.27; $\chi^2 = 1.242$
S136 <sup>2</sup> Lifetime (%)	349 (4.9%)	20 (8.9%)	p = 0.0058; $\chi^2 = 7.608$ ;
FRS <sup>1</sup> Lifetime (%)	2655 (37%)	95 (42.4%)	p = 0.096; $\chi^2 = 2.773$
Mdn. FRS Contacts (IQR)	2 (1-16)	3 (1-21)	p = 0.0088; W = 106927
CRHTT Lifetime (%)	4378 (60.9%)	100 (44.6%)	p < 0.001; $\chi^2 = 24.108$
Males PICU (%)	354 (10%)	14 (9.4%)	p = 0.82; $\chi^2 = 0.051$
Mdn. PICU LoS I(QR)	25 (12-49)	35 (19.2-46.8)	p = 0.42; W = 2168
Mdn. Inf. Admission Lifetime Days	31 (12-81)	52 (13-146)	p = 0.018; W = 109810
Mdn. MHA Admission Lifetime Days	55 (25-122)	74 (36-180)	p = 0.032; W = 54592
Mdn. Admission Duration (Total)	49 (19-121)	112 (24.8-213.2)	p < 0.001; W = 168845

**Table 1:** key findings. Mdn.=Median. EIS=Early Intervention Service. FRS=Urgent MH phonenumber. S136=police detention under MHA. MHA=mental health act. Inf.=informal

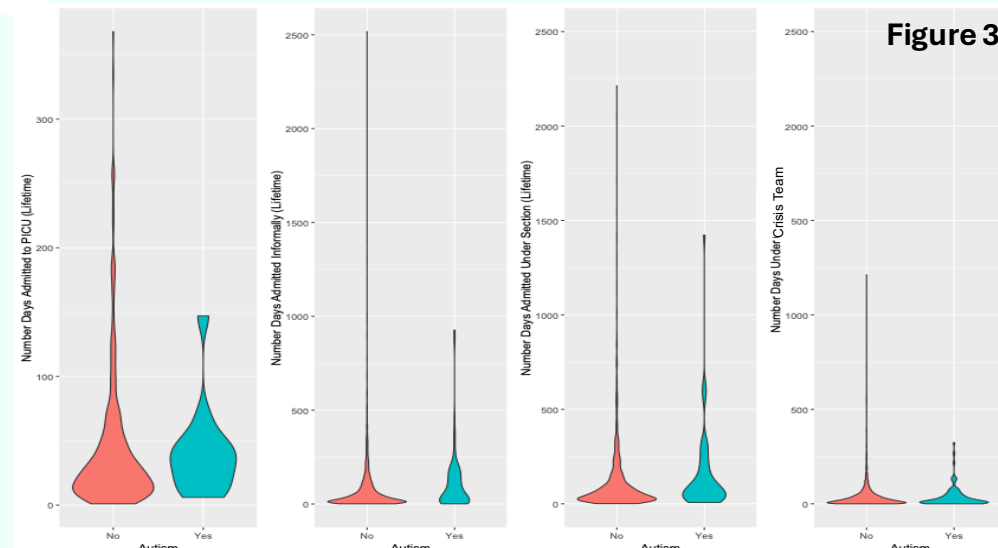


Figure 3