

Links Between Emotional Language and Clinical Features Among Individuals with Psychotic Disorders During Psychiatric Hospitalization



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Introduction

- **Computational markers of speech and language** show promise for informing diagnosis, prediction, and treatment of psychotic disorders¹⁻⁴
- Speech analysis among individuals with psychotic disorders has revealed alterations in usage of personal pronouns and negative emotional words⁵⁻⁷
- Further research is needed to understand relationships between speech characteristics and clinical markers of risk and resilience

Methods: Pilot Data from Inpatient Sample with Psychosis

Age	19–61 yrs old; <i>M</i> = 35.1 (<i>SD</i> = 11.8)	Duration Current Admission	4–57 days; <i>M</i> = 16 (<i>SD</i> = 9.9)
Gender Identity	20 Men; 6 Women; 2 Non-binary/Gender fluid; 1 Trans man; 1 Unsure	Stage of Illness	12 First-episode psychosis; 14 Longstanding psychosis; 4 Unclear
Racial/Ethnic Identity	20 White/Caucasian; 9 Black/African American; 4 American Indian/Alaskan Native; 2 Arabic/Middle Eastern; 2 Hispanic/Latino/a/x; 2 Asian/Pacific Islander; 2 Unsure/Self-describe	Psychotic Disorder Dx	 15 Bipolar I disorder w/psychotic features; 6 Schizophrenia/schizophreniform; 5 Schizoaffective disorder; 2 Unspecified psychotic disorder; 1 Delusional disorder; 1 MDD w/psychotic features
Education Level	 4 Less than high school; 7 High school degree or GED; 15 Some college/vocational; 4 Bachelor's degree 	WRAT Word Reading Standard Score (estimate of premorbid intelligence)	76–133; <i>M</i> = 96; <i>SD</i> = 14.5

Participant Characteristics (N = 30)

TAT Speech Samples

- TLI⁹ prompts and 8 ambiguous scene stimuli from the Thematic Apperception Test (TAT)¹⁰
- Participants asked to describe each picture as fully as they can for 1 minute each, including what they see in the picture and what they think might be happening

Linguistic Inquiry and Word Count (LIWC-22)

Computerized software¹¹ for analyzing word use in language
Types of words in the LIWC-22 dictionary are summarized as percentages of total number of words

among individuals experiencing acute and severe psychotic symptoms

 Improving speech-based prediction models of suicide risk is of particular importance as individuals with psychotic disorders are at heightened risk of dying by suicide⁸

- Selected variables based on prior research:
- Positive & negative emotion words & emotional tone
- Pronouns: first-person singular (e.g., "I", "me") and firstperson plural (e.g., "we", "our")

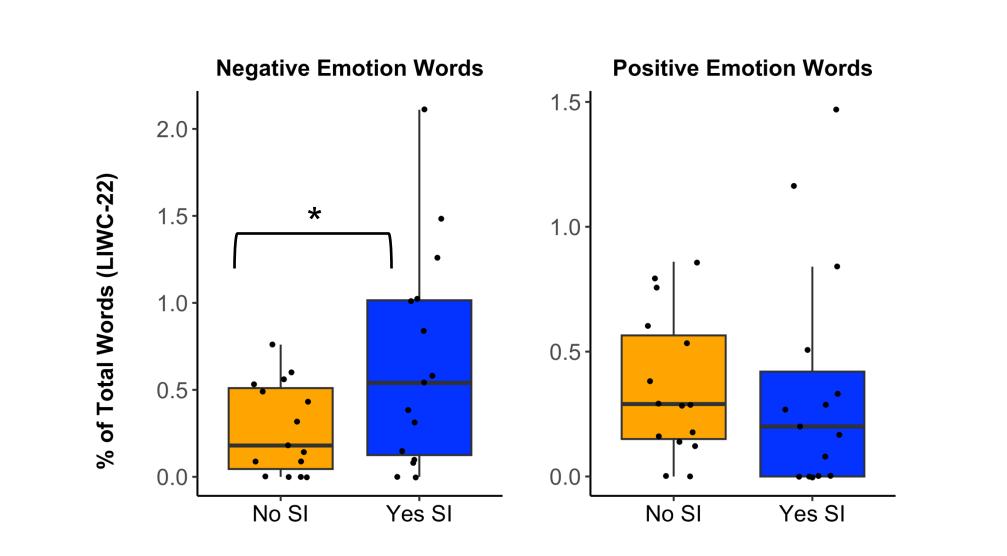
Results: Language Associations with Resilience, Psychotic Symptoms, and Suicidal Ideation

1-Minute Speech Samples 8 Thematic Apperception Test Stimuli N = 30 individuals with psychotic disorders during inpatient hospitalization

Total Word Count427-1908 words;M = 986.8 (SD = 323.7)

Resilience measure total scores (MHRM- 10^{12} and CD-RISC- 10^{13}) and PANSS- 8^{14} positive & negative item symptom severity did not significantly correlate with emotional words or first-person singular or plural pronoun usage (p > .1)

Higher Usage of Negative Emotional Words while Describing Scenes *in People Experiencing Suicidal Ideation* at Hospital Admission

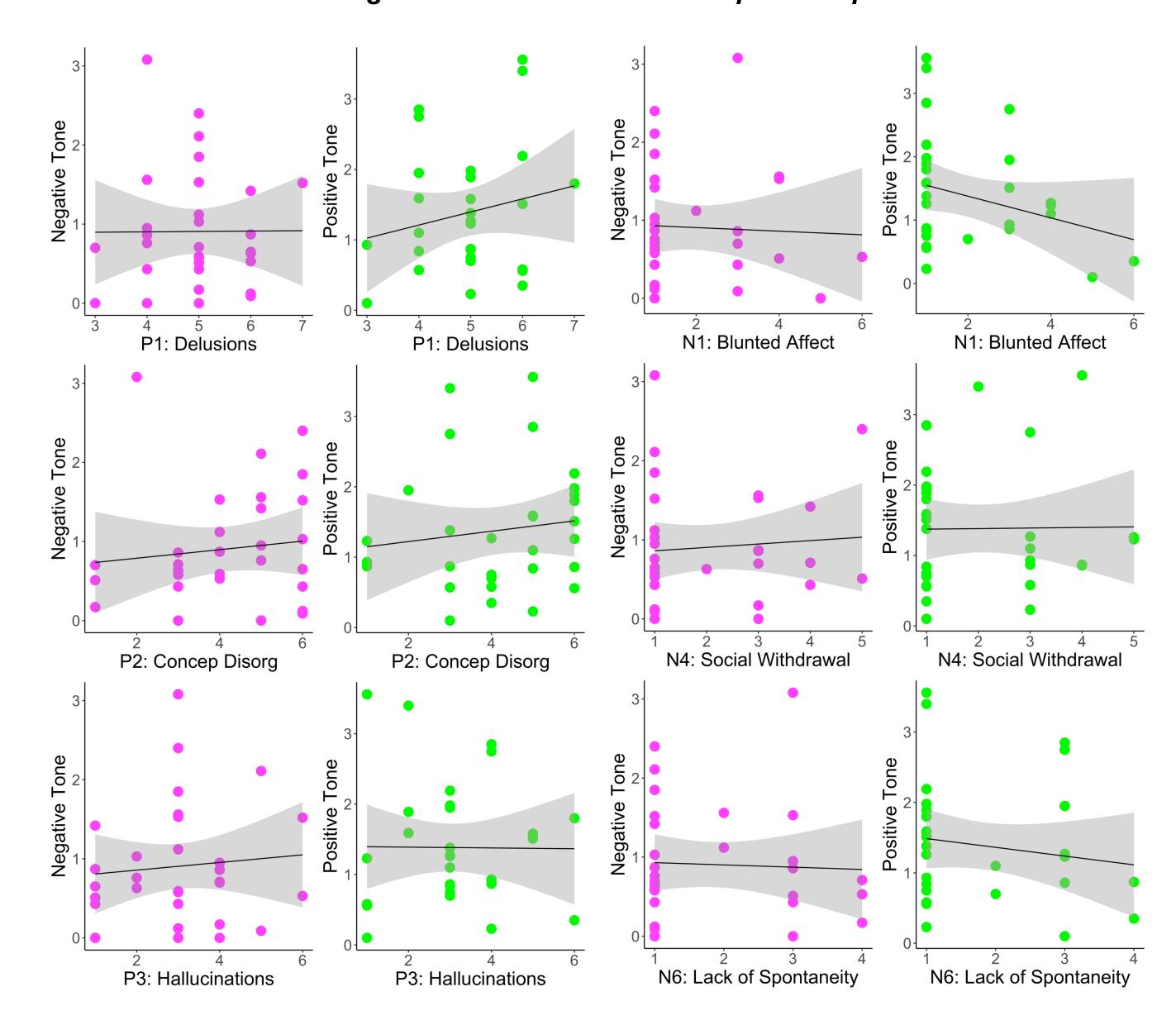


Example Participant TAT Scene Descriptions: Emotion Words & Suicidal Ideation

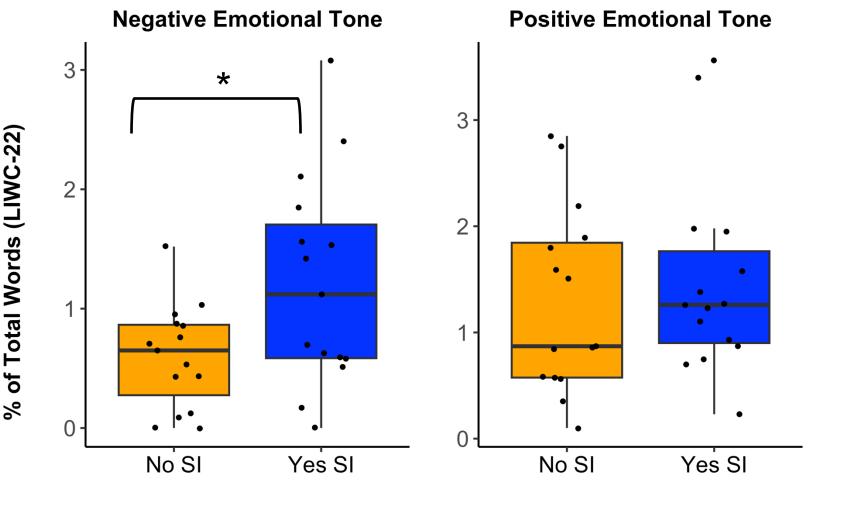
	Experiencing Suicidal Ideation	Not Experiencing Suicidal Ideation
T Boy in orway Scene	"See a child that's, uh, <i>bored</i> It's like he wants to go play, but it's all about working. Just <i>lonely</i> and <i>hurt</i> ." "The child looks in <i>despair</i> very poor and he's <i>worried</i> ."	"He's just chillin' by himself He's <i>happy</i> , he's just <i>loving</i> the sun He don't even got a door to his house, and he don't even care He knows that Pa is probably up there hunting and he'll be back."

However, greater severity on PANSS N6 Lack of Spontaneity of Speech was associated with lower word count in scene descriptions (*rho* = -0.41, *p* = .024)

PANSS-8 Positive & Negative Item Symptom Severity and Emotional Tone in Speech No significant associations in this pilot sample



Experiencing Suicidal Ideation at Admission



Experiencing Suicidal Ideation at Admission

**p* < .05

Higher usage of negative emotion words (t(18.8) = -2.17, p = .043, d = -0.79) and words with negative emotional tone (t(20.4) = -2.45, p = .023, d = -0.9) in people

	"He might be <i>mad</i> at his father. His father might have not bought him as much candy as he wanted he might have been offered a job working at a coal mine."	
AT Boat Scene	"but the son realized he really wasn't moving ahead in life so he decided to reject the boats, and he relapsed on crystal meth again His parents are pissed off too because no one is using the boat."	"Just a cool, <i>relaxing</i> beautiful day. A little boat is tied off, where they went and had a nice little picnic off the water really peaceful , <i>calm</i> day, not too bright, not too dark, which is perfect ."

Color coding key: **POSITIVE: Tone;** *Emotion;* **NEGATIVE: Tone;** *Emotion*

Conclusions & Future Directions

Results contribute to research of improving prediction of suicide risk among
individuals with psychotic disorders using easy-to-collect speech samples

Future goals:

TAT

Doc

- Continue data collection to build larger sample with greater statistical power
- Analyze relationships between emotionally valenced language and organization of speech

experiencing SI at hospital admission.

No significant difference between SI groups in positive emotion words, words with positive emotional tone, or first-person singular or plural pronouns (t < 1; p > .1).

- Analyze emotionally valenced language and first-person pronoun usage in IPII¹⁵ life story narratives within this same study to assess variation in lexical characteristics by speech context
- Conduct comprehensive quantitative and qualitative analyses of speech data using variety of linguistic tools to characterize different stages of illness and symptom and cognitive profiles
- Improve future assessments and treatments for challenges organizing thought and speech among individuals with psychotic disorders

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REFERENCES: (1) Bedi et al. (2015). *npj Schizophrenia*, 1(1), 1–7. (2) Corcoran & Cecchi (2020). Biol Psychiatry: CNNI, 5(8), 770–779. (3) Dalal et al. (2021). Schizophr Bull, 47(2), 344–362. (5) Buck & Penn (2015). J Nerv Ment Dis, 203(9), 702–708. (6) Lundin et al. (2023). Schizophr Res, 259, 140–149. (7) Minor et al. (2015). J Psychiatr Res, 64, 74–78. (8) Hor & Taylor (2010). J Psychiatry, 181: 326–330. (10) Murray (1943). Harvard University Press. (11) Boyd et al. (2022). UT Austin, 10, 1–47. (12) Bullock (2005). Human Services Research Institute, 36–40. (13) Campbell-Sills & Stein (2007). J Trauma Stress, 20(6), 1019–1028. (14) Andreasen et al. (2002). Psychiatry, 162(3), 197–206