REVIEW

Of the *member* of the dissertation council for the dissertation of Maria Vladimirovna Karyakina on the topic: "NETWORK MODEL OF NEUROCOGNITIVE IMPAIRMENTS IN SCHIZOPHRENIA SPECTRUM DISORDERS", submitted for the degree of *doctor* of psychological sciences in a scientific speciality of 5.3.6 Clinical Psychology

This dissertation seek broadly to explore the relationships of neurocognitive deficits in schizophrenia spectrum disorders (SSD). There are several broad aims including identifying different types of neuro neurocognitive deficit in patients with SSD, comparing those function with health controls, examining the impact of symptoms on neurocognitive function, and to explore the relationships amongst these variables in network analysis. Subjects were 115 adults diagnosed with SSD and 99 controls who were administered the Brief Assessment of Cognition (BAC) along with several traditional measures of symptoms including the Positive and negative Syndrome Scale (PANSS). In general controls were much more likely to have no significant impairments across the BACS subtests while patient were more likely to have moderate to severe levels of deficits. A k means cluster analyses was performed to separate subjects into three groups producing groups with minimal impairment, moderate impairments and severe impairments. These group differences were not reducible to difference in symptom severity. In a network analysis the BACS subtests so different patterns of interrelation. For patient more basic neurocognitive functions appeared as the central nodes while for health control more complex functions played that role, Overall the writing is excellent, the literature review and research were well conceived and analyses are appropriate and offer novel and important information. The candidate and her advisors are to be congratulated for such excellent work

I two three questions for potential discussion. First, were PANSS component scores (e.g. a 5 factor model) considered rather than items and general totals? Second is it possible that neurocognitive impairment lead to symptom exacerbation when they make it more difficult for patients to make sense of their psychiatric and social challenges leading to less effective coping and greater stress? Is it possible that the results really tell us that treatments are needed which are accessible to patients with significant neurocognitive (and metacognitive deficits), treatment that facilitate their making better sense of their psychiatric and psychosocial challenges and so more effective manage their psychiatric condition and its related complications?
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Dissertation of Maria Vladimirovna Karyakina on the topic: "NETWORK MODEL OF NEUROCOGNITIVE IMPAIRMENTS IN SCHIZOPHRENIA SPECTRUM DISORDERS." *Meets* the basic requirements established by Order No.11181/1 dd. 19.11.2021 "On the procedure for awarding academic degrees at St. Petersburg State University". The applicant Maria Vladimirovna Karyakina *deserves* to be awarded the academic degree of *doctor* of _Psychological sciences in a scientific speciality of 5.3.6 Clinical Psychology. Paragraphs 9 and 11 of the specified Order have not been violated.

Member of the Dissertation Council

Academic degree, academic title, position	signature	Full name
Ph.D. Professor and Clinical Psychologist		Paul H Lysaker

Date May 21 2022