

Image 2:

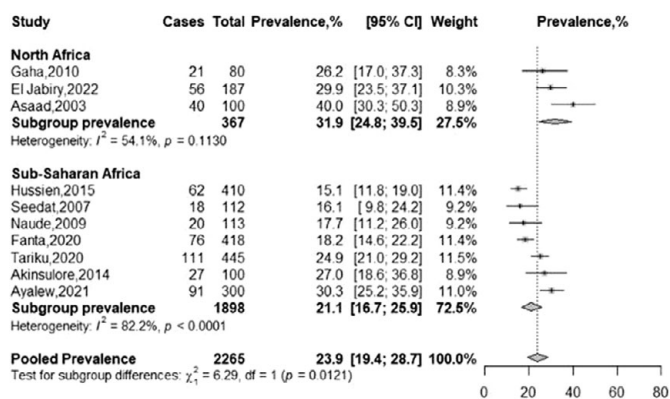


Figure 2. Forest plot of depression prevalence in schizophrenia patients according to African regions

Conclusions: Approximately one in every four schizophrenia patients living in Africa was positively screened for depression. This review draws health professionals' attention caring people with schizophrenia, and calls for further studies with a harmonization of screening tool, a better representativity of some subregions, and the assessment of key potential factors such as perceived stigma and self-stigma.

Disclosure of Interest: None Declared

EPP0277

The association between exposure score for schizophrenia and metabolic parameters in individuals with schizophrenia and healthy controls: Findings from the EUGEI study

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Introduction: Exposome is all nongenetic exposures from the prenatal period to death. Exposome score for schizophrenia (ES-SCZ) is a cumulative measure of environmental liability for schizophrenia. Our previous studies showed that the ES-SCZ is associated with mental and physical health outcome.

Objectives: The aim of the study is to investigate the association of the ES-SCZ with metabolic parameters in individuals with schizophrenia and healthy controls.

Methods: This study obtained 124 individuals with schizophrenia and 440 healthy controls from the European Network of National

Schizophrenia Networks Studying Gene-Environment Interactions, Work Package 6 (Vulnerability and Severity) Turkey dataset. The ES-SCZ was calculated by summing log-odds weighted environmental exposures (childhood adversities, winter birth, hearing impairment and cannabis use). Linear regression analysis was used to investigate the association between ES-SCZ and metabolic parameters. After that analysis age and sex were added as covariates.

Results: There was an association between ES-SCZ and diastolic blood pressure ($B = -2.69$ [95% CI -4.74; -.65], P -value = 0.010) in schizophrenia. ES-SCZ was associated with the fasting glucose level ($B = -6.23$ [95% CI -11.59; -.87], P -value = 0.023); high density lipid level ($B = 1.77$ [95% CI .27; 3.27], P -value = 0.021) in control and these results remained significant after adjusting for age and sex.

Conclusions: ES-SCZ was associated with important metabolic parameters. These findings show that ES-SCZ is not only related to increasing the risk for psychosis development but may also influence comorbidities. This result is important since it may increase our knowledge of ES-SCZ and contribute to the importance and framework of its clinical implementation.

Disclosure of Interest: None Declared

EPP0278

The Brief Negative Symptom Scale: external validation of symptom domains with clinical, cognitive and functioning-related variables in subjects with schizophrenia

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Introduction: Negative symptoms (NS) represent a heterogeneous construct of schizophrenia, whose conceptualization is still to be clarified. In the last decade, the conceptualization model that has received the most support from the literature has described 2 NS domains: the expressive deficit (EXP), which includes blunted affect and alogia, and the motivational deficit (MAP), which includes avolition, asociality, and anhedonia. However, different confirmatory factor-analytic studies suggest that the bi-dimensional model may not capture the complexity of this construct, which could be better defined by a 5-factor model (5 individual negative symptoms) or a hierarchical model (5 individual negative symptoms as first-order factors, and the 2 domains, MAP and EXP domains, as second-order factors). However, to our knowledge, no study has investigated associations between negative symptom models with social cognition and functional capacity, which are largely documented to correlate with negative symptoms, nor the associations with external validators over time, looking at the potential stability