Statistical analysis was performed using SPSS 23 version. After the descriptive analysis of the data, we compare the results of the scales.
Results Both disorders show a deterioration of emotional intelligence compared to the general population. There were no statistically significant differences in the comparison of emotional intelligence between schizophrenia and bipolar disorder.
Conclusion Schizophrenia and bipolar disorder have deficits in emotional intelligence, while it is difficult to show differences between them. These changes in emotional intelligence are part of a set of cognitive, social and non-social skills, which are altered in these severe mental disorders.
Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV162

Mixed-effects models: Family burden and functionality in patients with bipolar disorder

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Introduction The bipolar disorder (BD) has an important effect over the lives of patients and families. The attitude of the family is a modifiable factor through specific interventions and it has been related with BD prognosis.
Objectives Study a sample of families and patients with BD.
Aims Compare between two groups its course of burden of caring for family members with BD. Also, we will see the course of the functionality in patients.
Methods Sample of 148 individuals who caring a familiar with BD. Seventy-six of these followed psychoeducation session are going to be experimental group (EG), and the others 72 did not followed any session are going to be control group (CG). There is a follow-up at 6 months and one year. To see the course of the burden and the functionality it will be used mixed models.
Results At baseline, there were not significant differences between CG and EG in objective and subjective burden and functionality. But over time there were significant results in the three cases. For objective burden ($b = -0.016$; $P = 0.0001$) EG presented a drop ($b = -0.014$; $P = 0.0062$), while CG did not show changes ($b = 0.002$; $P = 0.4691$). For subjective burden ($b = -0.014$; $P = 0.0058$) without significant results for CG ($b = -0.352$; $P = 0.3203$) and a significant decrease in EG ($b = -0.017$; $P = 0.003$). For the functionality ($b = 1.474$; $P = 0.000$) there was a significant increase in EG ($b = 1.349$; $P = 0.000$) but not for CG ($b = -0.125$; $P = 0.3828$).
Conclusions Two groups did not differ at baseline however after the psychoeducation sessions appear clear differences, decreasing the burden for EG group and the functionality also improved for EG.
Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV167

Evolution of inflammatory dysregulation and oxidative stress in patients with first episode of mania

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Introduction Recent studies have focused on the imbalance in inflammatory and antioxidant pathways as possible causes of the underlying neurodegenerative processes in bipolar disorder. Thus, the study of these pathways in first episodes of mania (FEM) can increase knowledge about this issue.
Aim To compare plasma concentrations of pro-inflammatory (MCP-1, PGE2, TNFα) and oxidative parameters (TAS, NO_2 and TBARS) between controls and FEM patients and to analyze the evolution of these parameters in patients from baseline to 6 months assessment time.
Methods This study included 44 FEM patients and 79 healthy controls, aged 18 to 40. Blood samples were available for controls at baseline and for patients at baseline and 6 months after. TAS and TBARS were measured using non-EIA assay kits, $N0_2$ was measured with Griess method and PGE2, MCP-1 and TNFα with ELISA kits.
Results At baseline, TAS was significantly lower in patients than in controls and TBARS, MCP-1 and TNFα were significantly higher in patients. Among patients, TAS and MCP1 were lower at 6 months than at the illness onset and PGE2 and NO_2 were significantly higher than at baseline.
Conclusion Patients presented an increased oxidative damage and also a higher activation of pro-inflammatory pathways than healthy controls at baseline. After 6 months their level of oxidative stress continue increased. Pro-inflammatory parameters decreased overtime (MCP-1 and TNF α) but PGE2, increased surprisingly. This can be due to the fact that antipsychotics are not able to completely reverse baseline inflammation.
Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV168

Treatment of bipolar patients in manic phase: A comparison between asenapine and aripiprazole

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Introduction Agitation is the most evident symptom in an acute manic episode. It can be defined as excessive motor or verbal activity that can degenerate into aggressive behaviour. Both aripiprazole and asenapine are indicated for the treatment of agitation in patients with manic episode.
Aims To retrospectively evaluate the acute effects of drug therapy on psychomotor agitation rated with the PANSS-EC, the change in manic symptoms through the YMRS, the QoL with the SF-36v2 and the cardiometabolic effects of the new oral APS.
Methods We administered the following tests to 13 patients with DBI at T0 (baseline), T1 (after 1 week), T2 (after 4 weeks), T3 (after