

**Results** Predictors of high efficiency of amisulpride therapy were identified: clinical–total score according to PANSS less than 70, sum of scores according to subscale of negative disorders is more than 31 and immunological–number of HLADR ± lymphocytes below  $0.34 \times 10^9/L$ , CD16 ± lymphocytes more than  $0.18 \times 10^9/L$ .

**Conclusion** Complex of informative clinical-immunological criteria is proposed, which enables prognosis of the efficiency of psychopharmacotherapy for patients at admission. It enables optimizing the choice of differentiated therapeutic tactics and heightening the quality of specialized medical care for schizophrenic patients.

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## EV1270

### Can writing be used to study and improve the socio-cognitive functioning of individuals diagnosed with schizophrenia?

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Impairments in social and cognitive functioning are some of the most disabling features of the schizophrenia. They result in poorer communication with others, difficulties in maintaining employment status and decrease in community involvement. Recently, cognitive remediation therapy (CRT), which relies on computer-based drill and practice exercises, has emerged as a nonpharmacological intervention that aims to target and improve cognitive and social functions. Given the recent success of CRT based approaches, the question arises: can other nonpharmacological interventions which aim to augment and improve socio-cognitive functions be effective? Building upon Vygotsky's (1934) theorizing, we conducted an 8-week long study involving 19 participants. The study uses the methodology of narrative inquiry to examine participants' ability to employ varied socio-cognitive functions (affect, causation, perceptive-taking, logical/hypothetical inference, etc.) when writing about everyday activities and attempting to resolve conflicts in narratives. Prompts employed in this study directed participants to write about three different socio-cultural contexts: (1) inpatient; (2) outpatient and (3) a fictional context. The fictional context aimed to examine participant's ability to imagine and express alternative futures/scenarios. Data show significantly higher frequency of occurrence of linguistic devices tied to cognitive functions in (3) fictional narrative context when compared to either (1) inpatient or (2) outpatient context. Use of affect was the only statistically significant difference between contexts (1) and (2). Findings indicate that individuals diagnosed with schizophrenia are able to vary the use of social and cognitive functions across narrative contexts, suggesting that future socio-cognitive interventions can be anchored in mindfully planned narrative activities.

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## EV1271

### Antipsychotic polypharmacy among schizophrenia outpatients

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**Introduction** Since their introduction by Delay and Deniker in the 1950s, neuroleptic drugs have significantly modified the evolutionary prognosis of schizophrenia. Their combination has also become a widespread practice.

**Objectives** The aim of this study was to analyze the associations of neuroleptic drugs by describing the characteristics of types and doses, understanding the reasons for these associations and studying the relationship existing in such situation regarding adherence to treatment, tolerance and the number of hospitalizations.

**Methods** Our study was retrospective, descriptive and analytical. It has been conducted from March, 1st to May, 30th 2015 and involved 70 stabilized patients diagnosed with schizophrenia according to DSM 5. Clinical characteristics were collected from patients and their medical records. Evaluations were conducted using PANSS, MARS and GAS.

**Results** Overall, 70 male patients were recruited. The mean age was 40 years old: 30% received classical monotherapy while 70% were treated only by an atypical antipsychotic. Among patients receiving two drugs, 85% received classical bitherapy while 9% were under both classical and atypical drugs. Only 6% received atypical bitherapy. Chlorpromazine equivalent doses in case of monotherapy was 325.92 mg/day, while it reached 1148.65 mg/day in case of drugs association. Administration of a combined therapy had poor tolerance rate and all patients suffered from adverse effects. Adherence to treatment was better while receiving monotherapy (88% versus 45%) and the number of hospitalizations was lower with an average of 3 against 10.

**Conclusion** Our study revealed several shortcomings in our current management of patients with schizophrenia and addressed the implication of socioeconomic status on therapeutic outcomes.

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## EV1272

### Human induced pluripotent stem cells (hiPSCs) in schizophrenia: Modelling the disease and the treatment response

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Response to drug treatment is under the sophisticated control of complex signalling pathways and gene regulatory networks. Indeed, drug-induced modulation of dysregulated gene expression and altered synaptic plasticity are critical steps for the successful treatment of neuropsychiatric disorders. Among the antipsychotic drugs, clozapine (CLZ) is widely considered to be the most effective medication for the treatment of schizophrenia. However, due to its high risk for severe side effects, CLZ use is currently restricted to patients who do not respond to other antipsychotics. Nonetheless, up to 20% of patients are considered nonresponders to CLZ treatment. The mechanism of action underlying CLZ's exceptional clinical efficacy in SCZ is not fully understood. In this context, in vitro molecular and functional assessment of patient-derived glutamatergic and GABAergic neurons' properties are mandatory to reveal the mechanisms underlying CLZ responsiveness and might mirror the clinical response. Here, we will describe the generation of hiPSCs from SCZ patients, classified based on their response to conventional treatments, to CLZ or total resistance to every treatment. These patient-specific hiPSCs have been converted into

enriched cortical glutamatergic neurons and parvalbumin-positive GABAergic interneurons populations that are under inspection to reveal phenotypic and molecular/pharmacological aspects correlating with patient-specific responsivity pattern to CLZ treatment. These results might help to unveil the molecular basis of treatment response profiles that can be exploited to predict response to antipsychotic drugs and that might help to develop personalized treatments, more individually tailored and less hazardous.

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#### EV1273

### Organic psychosis: Much more than dopamine

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**Introduction** Most of elderly onset psychosis present as a consequence of one or more organic processes. We present the case of an 81-year-old patient with diagnosis of a posterior fossa meningioma. It emerged with abrupt positive symptoms of psychosis with important family and social disruption. The interest of the case lies in the low frequency of psychiatric symptoms associated to this type of tumor, given its location. Thus, these symptoms may be explained, by normal pressure hydrocephalus (NPH) secondary to the tumor.

**Objectives** To highlight the importance of performing a complete organic screening in elderly onset psychotic patients.

**Material and method** From the mentioned case, we performed a literature review of psychopathology associated with NPH.

**Results** Psychiatric examination demonstrated parasitization delusions and delusional misinterpretations; tactile and visual zoomorphic hallucinations were also present. They were compatible with Ekbom syndrome; anxiety and behavioral disorganization were prominent. We introduced treatment with risperidone 0.5 mg/12 h with important decrease of positive psychotic symptoms. Currently, the patient is waiting for a ventricular-peritoneal shunt.

**Conclusions** The NPH usually presents with memory failures, psychomotor slowing, problems in calculating and writing. It may progress to a neurological impairment so intense that may be indistinguishable from Alzheimer's disease. From a psychopathological point of view, affective or psychotic symptoms and/or behavioral disorganization may also appear. In few cases, HNT onset shows with prominent psychiatric symptoms instead of neurological impairment. These symptoms may improve with pharmacological and surgical treatment. Thus, it is important to get an accurate diagnosis.

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#### EV1274

### Reasons to choose a long acting antipsychotic and tolerability

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**Introduction** Aripiprazole depot is an atypical antipsychotic used to treat positive and negative symptoms of psychosis or acute mania.

**Aim** Describe the reason why psychiatrists switch the current antipsychotic treatment on to aripiprazole depot, its tolerability and the reasons to stop aripiprazole depot treatment.

**Methods** Descriptive analysis based on a sample of 37 patients, aged 18–65 years, treated during one year with antipsychotics at two community mental health units.

**Results** Switching on to aripiprazole depot principal reasons: promote adherence (25%), persistence of symptoms (25%) and high levels of prolactin or sexual dysfunction (16.66%):

– side effects of aripiprazole depot: insomnia (11.11%), inquietude (8.33%), sexual dysfunction (2.77%) and hypertensive crisis during administration (2.77%);

– 83.33% of the patients are still taking it after one year. The most common reasons to stop or change it were the presence of secondaries (11.11%) and clinical exacerbation (5.55%).

**Conclusions** Aripiprazole depot is well tolerated (even better than other antipsychotics). Common side effects are not severe and appear in a small percent of patients.

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#### EV1275

### Psychological resilience and quality of life amongst people with psychotic illnesses

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**Introduction** Psychological resilience is defined as an individual's ability to adapt to stress and adversity. People with psychotic illness often experience high levels of distress and difficulties adapting.

**Aims** To assess the relationship between the resilience of people with psychotic illnesses and their quality of life.

**Methodology** Outpatients from multiple settings attending Sligo-Leitrim Mental Health Services, aged 18+ years old with a diagnosis of either schizophrenia, bipolar affective disorder or schizoaffective disorder were approached by their treating teams and invited to participate. Other inclusion criteria were having a family member. Drug induced psychoses or no family member were exclusion criteria. The scales used were the Resilience Appraisal Scale and the schizophrenia Quality of Life Scale. This study is part of a larger study looking at family factors and psychosis.

**Results** The study sample was 58 enrolled but only 49 participants completed the 2 assessments, of these 33 were males (67.3%). Data was analysed using SPSS 21. Pearson's correlation coefficient for resilience and quality of life was 0.503,  $P < 0.001$ . This shows that higher resilience is associated with better quality of life amongst people with psychotic illnesses. These results could have useful clinical implications. If we can intervene to therapeutically increase resilience, we can eventually improve the quality of life of people with psychoses.

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