

post-traumatic stress disorder (PTSD) 0%. In our sample, patients with schizophrenia had a rate of anxiety disorders (73.9%) significantly higher ($p < .05$) than those with schizoaffective disorder (31.6%) or bipolar disorder (41.1%). Patients with PD or with OCD showed higher severity of illness only at t0; on the contrary, those with SAD demonstrated greater severity at t1.

Conclusions: PD, OCD and SAD resulted frequently comorbid in psychotic patients; SAD more prevalent in schizophrenia with a negative impact on the course of the illness.

P0170

Platelet serotonin and serum cholesterol concentrations in suicidal and non-suicidal male patients with first episode of psychosis

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Suicidal behavior is a major health risk in psychiatric disorders, especially in schizophrenia, and up to 10% patients will commit suicide. The neurobiology of suicide is still unclear. Suicidality has been related to a decreased central serotonergic (5-hydroxytryptamine, 5-HT) function and reduced cholesterol levels. Platelet 5-HT was used as a peripheral marker of the central serotonergic synaptosomes. The hypothesis was that suicidal patients in the first episode of psychosis will have different serum cholesterol and platelet 5-HT concentrations than non-suicidal patients in the first episode of psychosis. The aim of this study was to evaluate serum cholesterol and platelet 5-HT concentrations in suicidal and non-suicidal men in the first episode of psychosis and in healthy male controls. Venous blood samples were collected within 24 hours of admission, and serum cholesterol and platelet 5-HT were determined enzymatically and fluorimetrically. Platelet 5-HT and serum cholesterol concentrations were significantly lower in suicidal than in non-suicidal patients in the first episode of psychosis, and than in healthy controls. Our results suggest that lower concentrations of serum cholesterol and platelet 5-HT in patients with the first episode of psychosis might be useful biological markers of suicidality.

Keywords: Suicidality, The First Episode of Psychosis, Cholesterol, Platelet Serotonin, Men

P0171

Diagnostic and therapeutical approach in psychosis - pituitary adenoma comorbidity. Case report

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Background: Among pituitary adenomas, prolactin-producing pituitary tumors are the most common type which are treated frequently with dopamine agonists in intrasellar types. The onset of a psychotic disorder concomitant with the tumor complicates the diagnostic algorithm of the psychiatric condition and the following therapeutical approach of both of them.

The **Aim:** to elucidate on empirical basis the etiology of the psychotic disorder comorbid with pituitary adenoma in order to find an optimal therapeutical resolution to both conditions.

Method: female patient, 25 years old, was hospitalized for psychotic and expansive symptoms which appeared six months after initiation of bromocriptine treatment for prolactin-producing pituitary microadenoma and had a fluctuated course. All investigations

excluded the involvement of another organic factors. The difficulty of the case consisted in finding the differentiated etiology of the persistent psychiatric symptomatology: is it bromocriptine induced or is it a primary mental disorder?

Results: the psychiatric symptoms were treated with antipsychotics — quetiapine 1000mg/day, but the maintenance dose had to be reduced to half because the prolactin serum level raised. Three months later the patient relapsed and the antipsychotic dose was raised, which induced high prolactin serum level. Bromocriptine dose was raised as the psychiatric condition worsened and the antipsychotic dose was raised again. Finally bromocriptine switched to cabergoline 1,5mg/twice a week. The psychotic symptoms diminished and the remission was reached with prolactin serum level maintained within normal limits with cabergoline.

Conclusion: empiric research found that the most probable cause of persistent psychosis is related to the dopamine agonist use.

P0172

Blood glucose level in the patients with schizophrenia

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Background and Aims: Schizophrenia is a chronic mental disorder with unknown etiology. It seems that many endocrine and metabolic abnormalities are present in the schizophrenic patients. This study was done to determine the rate of abnormal plasma glucose levels in schizophrenic patients .

Method: Thirty two schizophrenics patients (16 male & 16 female) encountered in a cross-sectional descriptive survey . The fasting glucose levels of the patients were compared with normal subjects . For comparison of data , student's t. test was used .

Results: Five of the subjects in the patients group had impaired fasting glucose tolerance as defined by the American Diabetic Association Criteria (110 – 125 mg./dl.) In the control group , on the other hand , only 1 person had impaired fasting glucose tolerance ($p = 0 .015$).

Discussion: According to the results of this study , and also some others , it seems that abnormal levels of glucose are more common in schizophrenics than total population . It is strongly recommended that patients with schizophrenia be carefully examined for diabetes mellitus or abnormal glucose tolerance .

Keywords: schizophrenia , glucose , diabetes mellitus

P0173

Sensitivity of comparisons of TTAD across antipsychotics to patient selection criteria and model specification in a retrospective paid claims analysis

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Background and Aims: Investigate how selection criteria and statistical model specifications affect time to all cause discontinuation (TTAD) comparisons across alternative antipsychotics using retrospective database analyses.

Methods: 231,635 episodes of antipsychotic therapy were identified using data from the California Medicaid (Medi-Cal) program. A series of regression models were estimated for TTAD that altered