

to study medication was informed. The most frequently reported TEAEs were hyperprolactinaemia (57.7%) and injection site pain (32.8%).

Conclusions Risperidone-ISM achieved therapeutic levels from the first hours after drug administration and provided a sustained release throughout the 4-weeks dosing period over multiple intramuscular injections independently of the injection site. Risperidone-ISM was found to be safe and well tolerated.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EW488

The association between childhood trauma and empathy in patients with stable schizophrenia

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Introduction Empathy, which refers to the ability to understand and share the thoughts and feelings of others, has emerged as an important topic in the field of social neuroscience. It is one of the most understudied dimensions of social cognition in schizophrenia (SCZ).

Objectives To investigate the relationship between cognitive and affective empathy and CT in SCZ.

Methods Fifty-eight outpatients with stable SCZ completed the Childhood Trauma Questionnaire retrospectively assessing five types of childhood trauma (emotional, physical and sexual abuse, and emotional and physical neglect). They also completed the Questionnaire of Cognitive and Affective Empathy (QCAE) comprising five subscales intended to assess cognitive and affective components of empathy.

Results Patients with a history of sexual abuse better emotion contagion scores ($P=0.048$) which means that develop more easily self-oriented emotional state matching the affective states of others. Patients with a history of emotional neglect or/and in denial of CT had higher scores in perspective taking score ($P=0.017$). Perspective taking assesses the extent to which respondents can take another's perspective or see things from another's point-of-view.

Conclusions Investigating psychosocial mechanisms, specifically the role of CT, underlying the development of empathic capacities is important since empathy can represent a treatment-target.

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EW489

How do social cognition dimensions relate to DSM-5 dimensions of psychosis?

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Introduction Existing research shows that individuals with schizophrenia (SCZ) show substantial deficits in social cognitive domains, including facial emotion recognition (FER), empathy, and Theory of Mind (ToM). Their exact relationship with the different dimensions included in the "Clinician-Rated Dimensions of Psychosis Symptom Severity" of the 5th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) remains unexplored.

Objectives To investigate the relationship between different social cognition dimensions and the dimensions of psychosis included in the DSM-5.

Methods Fifty-eight outpatients with stable SCZ completed the Intention-Inferencing Task (IIT), a non-verbal ToM task and the Questionnaire of Cognitive and Affective Empathy (QCAE). They also completed a newly developed and validated FER task constructed from photographs of the face of a famous Tunisian actress and evaluating the ability to correctly identify Ekman's six basic facial emotions. The clinician-rated dimensions of psychosis symptom severity was used to evaluate 8 dimensions of psychosis.

Results The patients presenting higher cognitive empathy capacities had less present abnormal psychomotor behaviour scores ($P=0.05$). Higher levels of affective empathy were correlated to lower present delusions score ($P=0.037$). Better scores in the IIT were correlated to less present negative scores ($P=0.013$) and less impaired cognition scores ($P=0.009$). FER task score didn't correlated with any clinical dimension.

Conclusions Our results suggest the existence of specific relationships between social cognition dimensions and psychosis dimensions. Further studies are needed to confirm these relationships.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EW490

Evaluation of reproductive hormones relations with response to treatment in male patients with first episode psychosis

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Objectives Data regarding schizophrenia treatment has been increasing whereas the information about predictors of treatment response is limited. In this study, our aim is to investigate the serum levels of reproductive hormones as a biological predictor in terms.

Methods Thirty-three hospitalized male patients in GATA Haydarpaşa Training Hospital with the diagnosis of first episode psychosis were included into the study. The study was prospective and naturalistic in design. The clinical course was recorded by means of Positive and Negative Symptom Scale (PANSS) in pretreatment period, 2nd and 6th weeks of the study. Prolactin, FSH, LH, estrogen, testosterone and oxytocin serum levels were also measured at the same dates.

Results Treatment response was assessed as unresponsive when PANSS_{ttl} scores were lower than 25%, partial response when PANSS_{ttl} scores were between 25%-40% changes, and response when PANSS_{ttl} scores were higher than 40%. Patients were grouped according to those cut-off points. There was a significant positive correlation between oxytocin, FSH serum levels and positive symptoms ($\rho=0.437$, $P=0.011$; $r=0.385$, $P=0.027$). There was also significant negative correlation between testosterone serum levels and negative and total psychopathology scores ($r=-0.352$, $P=0.044$; $r=-0.429$, $P=0.013$). It was seen that pretreatment testosterone levels had a significant biological marker on predicting remission when the serum levels were lower than 460,91 ng/dL.

Conclusions This study shows that hypothalamo-hypophysial-gonadal axis hormones and reproductive hormones, especially testosterone, may be an important biological marker of treatment response prediction in first episode psychosis.