

and to understand the underlying mechanisms, body weight, waist and hip circumference, POMC and NPY levels from hypothalamic nutrition regulating neuropeptides, CCK from peripheral neuropeptides, a pancreatic hormone insulin, and the effects of escitalopram use on these parameters were investigated.

Methods: In this prospective study, 30 patients, who were decided to have escitalopram treatment and who met the inclusion criteria and continued the treatment for 12 weeks, were included in the study.

Results: Weight, waist circumference increase and waist-hip ratio decreased significantly after 12 weeks. The decrease in neuropeptide level in POMC was significant.

Conclusions: In our study, according to the insignificant change in lipid parameters it was thought that the use of escitalopram does not cause a metabolic change that would increase the risk in terms of metabolic syndrome and cardiovascular disease, despite the short study period. The decrease in POMC levels due to escitalopram use; It was thought that it may lead to weight gain by modulating eating behavior modulation.

Disclosure of Interest: None Declared

Schizophrenia and other psychotic disorders 07

EPP0754

Efficacy of paliperidone palmitate 3-month formulation in preventing hospital admissions and emergency room visits. 66 months of follow-up

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Introduction: Paliperidone Palmitate 3-month formulation (PP3M) has shown a significantly longer time to relapse compared to placebo, with similar efficacy and safety to Paliperidone Palmitate 1-month (PP1M) (Carpiniello et al. *Drug Des. Devel. Ther.* 2016; 10 1731–1742).

Objectives: The main objective of this study was to determine the effectiveness of PP3M in preventing hospital admissions and emergency room visits, in people with non-acute schizophrenia in a naturalistic psychiatric outpatient setting

Methods: Sample: 30 people with diagnosis of schizophrenia (DSM 5 criteria), who had started treatment with PP3M, after being stabilized with PP1M (the dose was not modified in the four months prior to inclusion in the study)

Quarterly basis, the following evaluations were performed during a follow-up period of 66 months:

The Clinical Global Impression-Schizophrenia scale (CGI-SCH)

Treatment adherence, concomitant medication and the number of hospitalizations and emergency visits

Efficacy values: Percentage of patients who remained free of admissions at the end of 66 months of follow-up.

Other evaluation criteria: Percentage of patients who never visited the emergency department at the end of 66 months of follow-up. Average change from baseline visit to the final evaluation as assessed by score obtained on the following scale: GSI-SCH, percentage of patients on antipsychotic monotherapy and treatment adherence rate.

Results: The mean dose of PP3M was 401.55 mg

The percentage of patients who remained free of admissions at the end of the 66 months was 83.25% and the percentage of patients who never visited the emergency department at the end of 66 months was 79.92%

Mean variations from baseline scores at 66 months were: (-0.36 ± 0.37) on the GCI-SCH.

The percentage of patients on antipsychotic monotherapy at the end of the 66 months was 76.56%

The rate of adherence was 86.58%

Conclusions: In our study, we found that paliperidone palmitate 3-month formulation was effective in reducing the number of admissions and visits to the emergency department, under conditions of daily clinical practice.

Disclosure of Interest: None Declared

EPP0755

Alterations in peripheral levels of cytokines and associated inflammatory markers in acute and chronic stages of schizophrenia spectrum disorders: a systematic review and network meta-analysis

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Introduction: It has been previously identified that levels of peripheral inflammatory proteins, such as cytokines, are altered in people with schizophrenia spectrum disorders (SSD).

Objectives: As there is considerable inconsistency in the literature with respect to how inflammatory profiles differ between acute and chronic stages of SSD, a systematic review and network meta-analysis was performed.

Methods: Records from CINAHL, the Cochrane Central Register of Controlled Trials, EMBASE, PubMed, and PsycINFO were systematically searched from inception until 31 March 2022 for published studies that had measured levels of inflammatory proteins in cases of SSD and healthy controls. Pairwise and network meta-analyses were performed to determine whether there were significant differences in mean peripheral protein concentrations between acute SSD, chronic SSD, and healthy controls.