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Background and aims: Schizophrenics differ in their outcome mainly because different response and side effects to treatment, and clinicians do not have good instruments to choose the best antipsychotic (AP) for each individual. Weight gain is a frequently observed side effect with many AP treatments and seems to be underreported and under-recognized in many patients.

Methods: The potential effect of the Trp64Arg variant in beta3 adrenergic receptor gene on weight gain and obesity was investigated applying meta-analytic techniques, combining all published data while restricting our analysis to studies investigating the Trp64Arg in antipsychotic-induced weight gain and obesity. We also investigated whether ancestry (Caucasian versus African-American) and clinical factors moderated any association.

Results: We found no evidence for association of the Arg64 allele with weight gain and obesity ($z = 0.49$ $p = 0.626$) but without significant between studies heterogeneity ($\chi^2 = 0.17$ (d.f. = 1) $p = 0.678$).

Conclusions: Our meta-analysis does not provide support for the association of Trp64Arg in weight gain but indicates that firmly establishing the role of pharmacogenetics in clinical psychiatry requires much larger sample sizes that have been hitherto reported. On the other hand, the number of the studies employing psychotic patients is too small compared to the number of studies that have investigated this polymorphism in obesity.

P174

Weight gain in patients with risperidone injection

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Introduction: It is well known the difficulties found in making most psychotic patients follow a long-lasting oral treatment. To overcome this problem, injected drugs were developed over the last decades. One of the main side effects of these drugs is weight gain. To assess its importance in the newest long-acting injection of risperidone, a retrospective study was developed.

Material and methods: Clinical records of 61 patients with injected risperidone were reviewed, obtaining data about pre-treatment weight and weight after a year of bimensual injections. Patients with eating disorders or organic pathology were excluded. Other variables were recorded: doses, other injected treatments in the previous year and the weight gain, and coadjuvant oral treatment of neuroleptics during the studied period.

Results: No statistically significant weight differences were found during the first year of treatment ($p > 0.05$). When considering doses, or patients with coadjuvant therapy of low-dose neuroleptics, no difference was found either ($p > 0.05$).

23 of these patients followed another long-lasting injected treatment for at least a year before sweeping to risperidone. A bigger weight gain was found in that previous period of time than in the following year with risperidone ($p = 0.037$).

Discussion: Compliance to treatment is one of the keys to success in schizophrenia management. Side effects may hazard this compliance: injected long-lasting risperidone seems to minimize weight gain

in these patients, compared to previous injected drugs, making it easier to follow these prolonged treatments.

P175

Psychiatry and culture: A journey throughout mental disorders and its socio-cultural context

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Background and aims: Psychiatric disorders are considered to be universal, being found in all types of societies, from small nomadic groups to large complex civilizations. We can understand Cultural Psychiatry as a perspective that looks for comprehension of psychiatric disorders from the viewpoint of systems of meanings and values prevalent in a society. It went through great developments in the last 20-30 years, becoming extremely relevant in modern societies due to progressive cultural heterogeneity and migrations, which is the case of Portugal.

Methods: The authors undertake a revision of this topic in the literature

Results: In a global picture Mental Disorders tend to be more prevalent in geographical contexts of poverty and that amazingly rich specificities are found throughout all psychiatric conditions, including suicidal behaviour, psychotic disorders, affective and anxiety related disorders, among many others, in what concerns ethnic and religious variability within countries, urban/rural environment and social status. It is now accepted that individuals with different ethnic and ancestral backgrounds might differ significantly in their biological inheritance, including pharmacological responses with its implications in therapeutic range and adverse effects.

Conclusions: It is imperative to take into account all these aspects in every society in order to adequately assess and treat psychiatric patients and ultimately achieve the real meaning of Modern Psychiatry.

P176

Psychopharmacologic evaluation in a group of psychotic patients

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Objective: With this work we pretended to detect, to analyse and to investigate the prevalence of the non-compliance psychopharmacological through self-information in 64 ambulatory psychotic patients who come along to revision in a mental health.

For it we have revisioned the psicofarmacological groups and the diagnostics of the non-adherence patients and the adduce reasons putting in relationship with different variables sociodemographics and clinics, through a transverse and descriptive study.

Method: We have used the direct question to the patient about pharmacologic compliance and scale of socio demographic variables, and other clinical variables like solicitor, remittent, type of demand, personal and familiar psychiatric background, diagnosis CIE-10, number of drugs and incorrect dosage causes.

We have also applied central tendency and dispersion measures to the quantitative variables establishing comparisons and degrees of correlation. The qualitative variables have been subjected to basic statistical tests, with frequency tables, determination and comparison of percentages and use of Chi-square. It has been accepted a significant level of 5% considering the void hypothesis if $p > 0.05$.