

Methods A total of 984 patients meeting the DSM-IV criteria for schizophrenia who switched their antipsychotics to be paliperidone ER were recruited from 61 sites in five countries in Southeast Asia. We assessed patients in terms of demographic profile, sleep quality and daytime drowsiness as visual analog scale.

Results Patients in our studies received paliperidone ER treatment for 6 months. About 70% completed the treatment. Sleep quality and also daytime drowsiness were significantly increased in patients compared with their baseline. The predictive factors that have effect on sleep profile improvement were completion of the study and baseline PANSS score.

Conclusion Patients receiving paliperidone ER were found to have improvement in sleep quality and also improvement in daytime drowsiness, especially in patients within completion group and the higher baseline PANSS score.

Disclosure of interest The author has not supplied his/her declaration of competing interest.

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EW0493

Measuring motivation in patients with schizophrenia with apathy evaluation Scale (AES). Pilot study of the Russian version

M. Minyaycheva*, K. Kiselnikova, L. Movina, I. Gladyshev, O. Papsuev

Moscow Research Institute of Psychiatry, Outpatient psychiatry and organization of psychiatric care, Moscow, Russia

* Corresponding author.

Introduction Reduction of mental productivity and motivation in patients with schizophrenia is one of the core features of negative symptoms of schizophrenia spectrum disorders. Lack of motivation affects social functioning and outcomes, reduces effects of psychosocial treatment and rehabilitation.

Objectives To research AES abilities in measuring motivation in patients with schizophrenia spectrum disorders. The aim of the study was to investigate correlations of Russian translation of clinician-rated and self-rated versions with PANSS amotivation subscale and negative subscale items.

Methods Fifty patients with schizophrenia spectrum disorders were recruited to participate in the study and were assessed with PANSS, AES-C and AES-S by trained raters. Only patients in “stabilized” state that met inclusion criteria of PANSS total score \leq 80 points were eligible for consecutive AES assessment.

Results Overall, moderate positive correlations were established between AES-C and PANSS amotivation subscale N2 and N4 items, N6 item and total PANSS negative subscale. No significant correlations with G16 item were registered. AES-C and AES-S versions also showed positive Spearman correlations ($r=0.43$; $P<0.05$), while no correlations between AES-S and amotivation PANSS items were registered.

Discussion Moderately strong correlations between AES-C and PANSS N2, N4 and N6 items show feasibility of AES-C version in terms of measuring motivation in patients with schizophrenia spectrum disorders. Results of AES-S analysis demonstrate certain problems in patients' abilities in self-assessing motivation. Patients with prevailing paranoid syndrome showed poorer results in AES-S scores.

Conclusions AES-C is a sensitive psychometric tool with good properties in measuring amotivation in patients with schizophrenia.

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

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Efficacy and quality of life in patients with schizophrenia and schizoaffective disorders treated with long-acting paliperidone palmitate: A naturalistic longitudinal study

A. Nivoli^{1,*}, L. Folini¹, L. Floris¹, M. Antonioli¹, F. Pinna², M. Paolo¹, C. Bernardo², L. Iliana¹

¹ University of Sassari, Department of Psychiatry, Sassari, Italy

² University of Cagliari, Department of Psychiatry, Cagliari, Italy

* Corresponding author.

Introduction Intramuscular paliperidone palmitate (PP) is a long-acting, atypical antipsychotic for intramuscular (IM) administration in the treatment of patients with schizophrenia.

Objective To study efficacy and quality of life in patients with schizophrenia and schizoaffective disorders treated with long-acting paliperidone palmitate.

Method A non-randomized, prospective naturalistic study was performed in out-patients with schizophrenia and schizoaffective disorder unsuccessfully treated with oral antipsychotics. Efficacy of PP over time was evaluated by using BPRS 24-items (Brief Psychiatric Rating Scale) Quality of life was evaluated by the QL-Index (Quality of life Index) at T0 and at most recent visit (T1).

Results Data were available for 16 outpatients consecutively prescribed PP and naturalistically treated attending at the Psychiatric Clinic, University of Sassari. Patients were predominantly male ($n=9$; 56.2%), with schizophrenia ($n=10$; 62.5%). Three patients dropped out (18.8%). Mean time on PP treatment was 870.0 days (sd 217.02) at a mean PP maintenance dose of 97.82 ± 37.17 mg eq. BPRS mean total score at T0 was 55 (sd 14.5) and at T1 was 44.8 (sd 11.8). QL-Index mean total score was 5 (sd 1.6) at T0 and 7.2 (sd 2.4) at T1. Paired sample test showed a statistically significant difference in decreasing symptoms at BPRS over time ($P=0.009$) and in improving Quality of life at QL-Index ($P=0.017$). The analyses showed a significant improving at the following BPRS sub-items: Depression ($P=0.021$), Hostility ($P=0.022$), Suspiciousness ($P=0.005$), Hallucinations ($P=0.050$), Unusual thought content ($P=0.029$), Self-neglect ($P=0.028$), Conceptual disorganization ($P=0.044$), Emotional withdrawal ($P=0.028$) and Distractibility ($P=0.014$).

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

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EW0495

A randomized single-blind placebo controlled trial of memantine, as adjunctive therapy for treatment of negative symptoms of paranoid schizophrenia

Y. Osadshiy*, D. Archakov, E. Tarakanova

The Volgograd Scientific-Production Association “YugMed”, Psychiatry and Addiction, Volgograd, Russia

* Corresponding author.

This study analyses the efficiency of memantine—an antagonist of N-methyl-D-aspartate receptors—as adjunctive therapy for the treatment of negative symptoms of paranoid schizophrenia. Fifty-two patients (30 males; age 20–50 years) were included with the diagnosis of F20.014 and F20.024 according to the international classification of diseases (version 10). The patients had been receiving neuroleptic monotherapy with a fixed dose for a period of at least 4 weeks prior to randomization. Clinical data were collected 8 weeks after memantine had been introduced as part of the treatment regimen. A patient was considered as responding to treatment if they: