

with delusions was associated with the other dimensions, excepting for empowerment with negative symptoms (which in turn was not associated significantly with any dimension). Empowerment regarding hallucinations and with disorganization were only associated with empowerment with delusions, which was also associated with anxiety symptoms ($r = -.52, P = .016$).

Conclusions The EWPSS presented adequate reliability and validity. Further studies intended to explore the factorial structure of the EWPSS are under development.

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

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EW0502

Audit on prescribing practice of depot antipsychotic injections in the adult community mental health service

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Introduction There are a number of good standard practices available for prescribing long acting antipsychotics. Adherence to these guidelines will minimise any harm to the service users.

Aims To compare depot antipsychotic prescribing practice with good standard practice guidelines of BNF, Trust and Maudsley guidelines.

Objectives To compare practice with standards in the areas of:

- licensed indication;
- dose/frequency range;
- avoiding poly-pharmacy;
- regular review of clinical and side effects.

Methods Case notes of a randomly selected sample of 30 patients from the depot clinic at the City East Adult Community Mental Health Team Leicester, UK were retrospectively investigated. The data collected was analysed and the results were produced. Compliance with the best practice guidelines was calculated and recommendations made based on the findings.

Results One hundred percent compliance was noticed in licensed indications and dose/frequency within BNF range. However, 14% patients received poly-pharmacotherapy, 86% had regular outpatient review, but only 46% had review of side effects.

Conclusions Better quality of documentations by the clinicians, improvised technology to elicit automatic review reminders, introduction of checklist for clinics to include review of all clinically important information, wider dissemination of the findings of this investigation, and re-auditing practice to explore impact of this investigation was recommended.

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EW0503

The role of cannabinoids in schizophrenia: Where have we been and where are we going?

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Introduction Several studies have shown that both endocannabinoid system (ECS) and synthetic cannabinoids (SC) might be involved in schizophrenia.

Objectives To review recent literature on the role of cannabinoids in schizophrenia. The review includes the evidence of cannabis use as a risk factor for the development of schizophrenia, but also the preliminary evidence for the use of cannabinoid-based compounds in the treatment of psychosis.

Methods The authors made an online search on PubMed for clinical trials and reviews published in the last 12 months, using the keywords: “cannabinoids”, “endocannabinoids”, “phytocannabinoids” and “schizophrenia”.

Results The use of *Cannabis sativa* is associated with increased risk of developing psychotic disorders, including schizophrenia, and earlier age at onset of psychosis. Δ 9-Tetrahydrocannabinol (THC) has multiple actions in the brain development, including impairment of neuroplasticity, dysregulation of dopamine and glutamate signaling, and, possibly, neurotoxicity. The ECS has been implicated in psychosis both related and unrelated to cannabis exposure. Cannabinoid receptors type 1 (CB1 R) and type 2 (CB2 R), as well as the endogenous ligand N-arachidonylethanolamine (AEA) and 2-arachidonylglycerol (2-AG) levels, are most likely to be involved in the pathophysiology of this disorder. On the other hand, the antipsychotic effects of some cannabinoids have been investigated in recent studies. Cannabidiol (CBD) and Δ 9-tetrahydrocannabivarin (THCV) may have therapeutic potential for the treatment of psychosis.

Conclusions Emerging evidence suggests an important role of ECB system and SC on schizophrenia. On the other hand, recent studies have shown some phytocannabinoids might represent therapeutic promises in this disorder.

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

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EW0504

Impact of environmental influence and vulnerability to stress in the development of first psychotic episode

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Introduction Some findings in patients with first psychotic episode (FEP) could be related to alterations of stress responses. Alterations of stress response are reflected in the alterations of the HPA axis.

Objective To assess the difference in stress response in FEP patients and healthy controls as well as implications of environment to vulnerability to psychosis.

Aim To assess endocrine and autonomic responses to acute psychosocial stress, their associations with onset of the first psychotic episode as well as the influence of the environmental factors.

Methods We have assessed clinical status through clinical psychiatric interviews, standardized psychiatric scales and validated psychological scales, (LEQ, WHOQOL-BREF, PBI, Rosenberg) in 45 subjects with FEP and 50 age and gender matched controls. All participants were then exposed to the Trier Social Stress Test (TSST).

Results Our preliminary findings on a sample of 95 participants indicate a differences between patients and controls in salivatory

cortisol measured in 5 time points during the TSST. Patients with FEP experience more levels of baseline cortisol, and less changes during the stress test than controls. Baseline stress levels indicated in the salivatory cortisol levels correlate with perceived self-esteem, psychological and social quality of life.

Conclusion Our findings support the alterations of stress response, possibly indicating vulnerability to stress in persons with FEP.

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EW0505

Executive function assessment in young hospitalized schizophrenic patients with the “CANTAB Schizophrenia Battery” (Russian sample)

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Introduction Impairment of executive function is the fundamental feature of the cognitive dysfunction in schizophrenia has to be measured throughout the illness regularly. Computerized technologies for assessment of cognitive dysfunction are widely used. However, their applicability in hospitalized schizophrenic patients setting should be specially examined.

Objective Executive function in schizophrenia.

Aims To test the applicability of “CANTAB” neurocognitive battery for measurement of executive function in young hospitalized schizophrenic patients in Russian sample.

Methods Fifteen inpatients diagnosed with schizophrenia according to ICD-10 (F 20.xx), 13 males and 2 females, aged 23.5(SD 3.2), disease duration is 5(SD 1.6) years and 16 healthy individuals, 7 males and 9 females, aged 21.3(SD 0.7). Spatial Working Memory (SWM) (Mnemonic Executive function), Stockings of Cambridge (OTS) (Planning Executive function), Intra/Extra-Dimensional Shift (IED) (Cognitive flexibility) were administered.

Results The majority of patients and controls easily understood the test instructions. Both groups did not have any difficulties with the touchpad. The “CANTAB” demonstrated sensitivity to the impairments of executive function. As a group, patients with schizophrenia performed significantly worse than controls on almost all tests: SWM–Between errors ($P=0.028$), Total errors ($P=0.019$), Strategy ($P=0.03$), Mean time to last response ($P=0.001$); OTS–Mean choices to correct ($P=0.044$), Problems solved on first choice ($P=0.009$), Probability of error given correct ($P=0.021$); IED–Total errors ($P=0.015$), Total trials ($P=0.002$).

Conclusion The “CANTAB” is an applicable instrument for assessment of the executive function in young hospitalized schizophrenic patients. It can be used both for experimental and clinical needs.

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

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EW0506

Psychological traits of skin picking disorder and psychogenic itch

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Introduction Despite the intense discussion of psychiatric comorbidity in psychodermatology, research on psychological components of skin picking and psychogenic itch is limited, especially when it concerns patients’ representation of skin perception and their attitude towards disease.

Objectives To characterize psychological traits of skin picking and psychogenic itch disorder by comparing aspects of bodily experience.

Aims To reveal internal relations of different components of bodily experience in skin picking and psychogenic itch.

Methods Thirty patients with skin picking disorder (L98.1) and 18 patients with psychogenic itch (F45.8) participated in the study. The psychosemantic method “Classification of sensations” was used to assess bodily experience. It includes estimation of 80 descriptors from 6 classes of bodily sensations: skin (ex. “itch”), inner body (ex. “sickness”), receptor (ex. “sticky”), emotional (ex. “anxiety”), dynamics (ex. “exhaustion”) and attitudinal descriptors (ex. “bad”). Cluster and factor analysis were performed.

Results The most significant aspect of bodily experience in skin picking was its dynamics as a transition from irritation to calmness connected with the sensation of itch opposed to all other sensations (there were opposite signs of factor loadings of these variables and they were included in the factor explaining 45% of total variance). In contrast, in psychogenic itch these relations are diffuse and consist of connections between skin sensations and inner bodily sensations and descriptors of emotions reflecting functional origin of disorder.

Conclusion Traits of psychological components in skin picking disorder and psychogenic itch should be concerned in the complex (psychiatric, psychological and dermatological) treatment of these disorders.

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

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EW0507

Interaction of symptoms and cognitive dysfunction in remitted schizophrenic patients with and without residua – important sign of heterogeneity for design of cognitive enhancer studies

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Introduction It is well-known fact that cognitive dysfunction (CD) determines the quality of remission in patients with schizophrenia. However many attempts to demonstrate the link between symptoms and CD failed. The reason for this fact is unclear.