

EPP1045

Chronic psychosis associated with new hallucinogenic drug 25I-NBOMe

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Introduction: The presence of perceptual disturbances and psychotic symptoms associated with substance abuse are widely known. While the abuse of substances is becoming more widespread, there is a general perception that their use entails fewer risks. 25I-NBOMe is a recently introduced hallucinogenic drug producing visual hallucinations and euphoria. Although people consume it like LSD, its chemical structure is different to LSD. 25I-NBOMe is related to other phenylethylamine derivatives (amphetamines and mescaline).

Objectives: Present a clinical case of psychosis triggered after the consumption of new emerging drugs and highlight that the extension of their consumption in the general population, especially in the most vulnerable, can trigger prolonged psychotic symptoms.

Methods: We present a clinical case report of a subject who developed perceptual disturbances and paranoid symptoms. These lasted for months.

Results: We describe the case of a 30-year-old man who required psychiatric admission after a single NBOMe intake five months earlier. He began with self-referential experiences and delusional ideas of prejudice, persecution and control in social networks. For months, intrusive images appeared in the form of flashbacks. He remains isolated, hardly sleeps and is easily irritated. He previously worked and had a well social network. Since adolescence, he had occasionally used alcohol, cannabis and cocaine. An uncle was diagnosed with schizophrenia. Treatment with long-term injectable aripiprazole started, reducing the symptoms and managing to recover work activity in a year.

Conclusions: 25I-NBOMe has its main activity as 5HT2 receptor agonism, which is associated with increased dopaminergic activity in the brain. Hallucinations, delusions, anxiety symptoms and depersonalization appear during acute consumption. However, some patients have developed a persistent hallucinatory chronic syndrome after consumption. As its use is expanding, it probably could increase the number of patients with induced chronic psychoses, especially those with greater susceptibility. One of the possible causes would be its analogous structure to other derivatives of phenylethylamine, which increase the risk of psychosis, and another would be the erroneous perception of being a less dangerous drug.

Disclosure of Interest: None Declared

EPP1046

Study protocol: Epigenetic variations associated to the conversion of schizophrenia in ultra-high risk adolescents, a 4-year follow-up study

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Introduction: Schizophrenia is a severe mental disorder characterized by negative (e.g., social withdrawal, apathy, anhedonia) and positive (e.g., hallucinations, delusions, disorganized behaviour) symptoms. Schizophrenia prodromal symptoms typically emerge during the adolescence. These symptoms consist of attenuated and/or intermittent psychotic symptoms and define the ultra-high risk (UHR) states of schizophrenia. Approximately, 30% of UHR individuals develop schizophrenia. It is important to find biomarkers associated with the conversion of schizophrenia in UHR individuals in order to develop preventive and therapeutic strategies, as well as to gain knowledge in the etiopathology of the disorder. In this regard, epigenetic variations have been identified as potential biomarkers associated with the conversion to schizophrenia, but the lack of research prevent to draw final conclusions.

Objectives: The objective of this communication is to report the study protocol of the research project named "Epigenetic variations associated with the conversion of schizophrenia in ultra-high risk adolescents". Its aim is to analyze the epigenetic marks that predict the development of schizophrenia in UHR youths.

Methods: A 4-year observational follow-up study will be conducted, assessing three groups of adolescents who have sought clinical help: 1) UHR group composed of individuals who have developed schizophrenia at the end of the follow-up; 2) UHR group composed of individuals who did not develop schizophrenia at the end of the follow-up; 3) a group composed of non-UHR individuals. Epigenetic marks will be analyzed in the peripheral blood of all the participants each 6 months. Clinical (i.e., positive and negative symptoms, depressive symptoms, anxiety symptoms, global functioning, traumatic events, alcohol and other toxics consumption) and sociodemographic data (i.e., age, sex, migration status, ethnicity, socio-cultural status, academic achievements) will be also assessed through standardized questionnaires.

Results: We hypothesize that specific epigenetic marks will predict the conversion of schizophrenia in the UHR group. Moreover, interactions between epigenetic variations and sociodemographic data will differentiate the three groups after the follow-up.

Conclusions: The findings of this project will help to develop preventive and therapeutic strategies, as well as to gain knowledge in the etiopathological pathways of schizophrenia.

Disclosure of Interest: None Declared

EPP1047

Role of Folic acid as adjuvant treatment in Schizophrenia: A randomized controlled trial

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Introduction: Schizophrenia is a chronic psychiatric illness with symptoms in positive, negative and cognitive domain. The interplay of dietary folic acid intake with common genetic variants that influence folate metabolism, has potential implications for Schizophrenia pathogenesis and treatment. Therefore, it's deficiency has been identified as a risk factor for Schizophrenia through epidemiological, biochemical and gene association studies.

Objectives: 1-To assess the efficacy of folic acid supplementation on severity of symptoms and overall functional status of patients
2-To assess the correlation of serum folate levels with symptom severity and overall functional status of patients

Methods: A randomized control trial study was carried out in the inpatient department of a psychiatric tertiary care centre on 40 participants (29 males and 11 females) who were between the ages of 18 – 55 years, met diagnostic criteria for Schizophrenia (ICD 10) and had at least 2 years of illness duration while those with a co-morbid psychiatric illness, medical illness and substance abuse were excluded. The participants were then randomly allocated into two groups (**experimental Group A** which received 5mg folic/day along with anti psychotic drugs and **control Group B** which received only anti psychotic drugs) and followed up for 3 months. Blood sample for measuring serum folate level was obtained from the experimental group at the beginning and at the end of the study period. Scales applied were Positive and Negative Syndrome Scale(PANSS) for symptom severity and Global Assessment of Functioning scale(GAF) for overall functional status.

Results: A significant difference (p value< 0.05) was observed in PANSS scores at the end of the study between experimental group and control group(**table 1**) and also in GAF scores between both the groups after 3 months(**table 2**). At the end of the study period, a strong negative correlation($r = -0.9$) was found between serum folate level and total PANSS score in the experimental group (**figure 1**) while the correlation between GAF score and serum folate level was strongly positive ($r = 0.8$) (**figure 2**).

Table 1

PANSS (3 Month)	Group A(n=20)	Group B (n=20)	P value
Positive	16.8±2.80	22.9±3.37	0.036
Negative	14.3±3.32	15.1±2.61	0.18
General	17.95±2.52	21.85±3.18	0.0001
Total	45.95±3.41	58±3.49	0.00249

Table 2

GAF	Group A(n=20)	Group B (n=20)	P value
0 MONTH	23.25±3.43	22.7±2.90	0.3
3 MONTH	65.75±4.22	44.9±7.09	0.0256

Image:

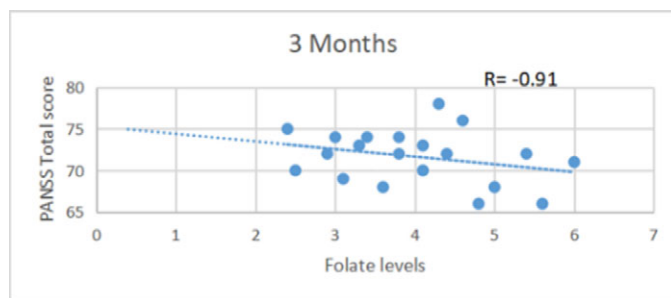
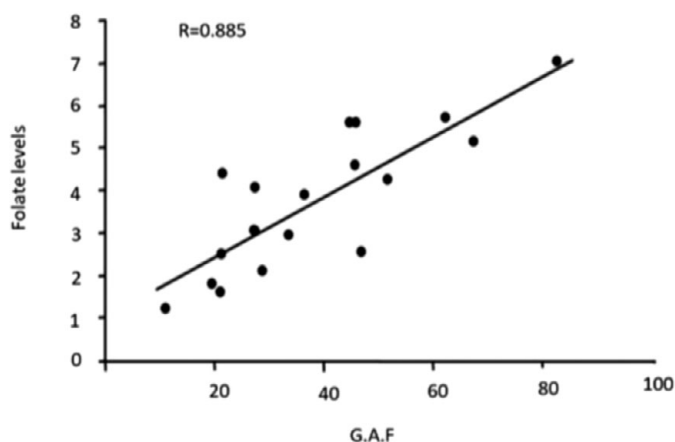


Image 2:



Conclusions: Our study is among the few to use a randomized controlled study design for assessing the effect of folic acid supplementation on severity of symptoms and global functioning in Schizophrenia, strongly suggesting the use of folic acid as an adjuvant treatment for Schizophrenia.

Disclosure of Interest: None Declared

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EPP1048

Group psychotherapy for patients with first-episode psychosis: Effect on the clinical status and use of resources

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Introduction: Psychotic disorders carry several economical, psychological and social consequences, both at individual and community levels. Early intervention programs after first-episode psychosis which combine pharmacological and psychosocial strategies are aimed at reducing symptoms, lowering costs in the use of health and non-health care resources and improving overall functioning. AGES-Mind study is based on manualized psychotherapeutic interventions for people with first-psychosis episodes.

Objectives: The aim of the study was to evaluate the effect of a group psychotherapeutic intervention on the clinical status and use of clinical resources in a sample of patients with first-episode