

olanzapine (70%) than risperidone (76%) ( $p=0.12$ ). Median time to discontinuation was 120 days (95% CI: 105-135), longer for olanzapine (150, 95% CI: 120-180) than risperidone (90, 95% CI: 71-109) ( $p=0.04$ ).

Self discontinuation was high (48%) with no significant difference between olanzapine (50%) and risperidone (46%). Switching rate was 25% and more likely to occur in risperidone (30%) than olanzapine (20%) (OR= 1.72, 95% CI: 1.13-2.61).

**Conclusion:** Effectiveness of antipsychotic medications in schizophrenia may be hampered by high rates of medication self discontinuation in outpatient practice settings. Time to discontinuation suggests olanzapine may be more effective than risperidone. Strategies to address causes of poor adherence should be incorporated in medication algorithms to optimize their effectiveness.

## P0235

Co-therapeutic team as the integrative constituent of group psychotherapy for patients with psychosis on acute psychiatric ward

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**Background:** Basic features of group psychotherapy for patients with acute psychosis are:

- focus on the sharing of psychotic experiences;
- different ways of interactive connections and transpersonal relations between patients and staff members;
- different realities represented, realized and interpreted by the participants;
- high risk of self stigmatization;
- paradoxical tension between the urgency readiness of psychiatric environment and the reflective attitude of group work.

**Methods:** A modified group analytic technique with free-floating discussion (Foulkes) is used to understand psychotic experiences. Group processes and symbolic contents are analysed on structural and communicative perspective.

### Results:

- The maintainance of complex group work c**Aims:**
- clear and stable boundaries;
- creative possibility of potential space (Winnicott);
- relational capacity of the staff;
- and high level of integration between the group and the institutional system.

### Conclusion:

- Co-therapeutic team facilitates integration in both direction:
- as a part of the group it helps the socialization of group members on the field of psychological work;
- as a part of the whole staff of the department it supports connections around the group.

The individual team member takes double role in the reality of the group: co-therapist and group member. The integration and conflicts between these roles should be interpreted in the context of the group.

## P0236

Involvement of neurotrophic factors in the treatment of schizophrenia with negative symptoms

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**Background:** Schizophrenia with negative symptoms implies cognitive deficit, correlated with the hypo frontal phenomena characterized by hypodopaminergic.

The increase of firing through hypoGABA-ergism leads to a glutamate activity exacerbation, emphasizing the cognitive deficit.

The neurotrophic factors increase the regulated release of dopamine/serotonine/GABA neurotransmitters, regulate the synaptic glutamate transmission on the NMDA receptors path and play a role in the protection of the dopaminergic neurons and in maintaining the number of receptors and their functionality .

**Method and Results:** A clinic observation study included twenty patients with schizophrenia with negative symptoms and cognitive deficit.

Between 2004-2007 a number of 10 patients from this group received second generation antipsychotic and neurotrophic factor (Cerebrolysin), while the other 10 received only antipsychotic drug.

The effects on cognition, global function, as well as daily activities were evaluated at 6, 12 and 18 months.

In the comparative tests on the two groups, the frequency of the individual responses was 30% in the group with associated neurotrophic factor, compared to 10% in the other.

Regarding the definite response for the above mentioned 3 criteria, the frequency of the responses was 10% in the group with associated neurotrophic factor, compared to 5% in the other.

**Conclusions:** The neurotrophic factor significantly reduces the cognitive decline in: global response, functional response, cognition.

The association of the neuroprotective factor in the treatment with second generation antipsychotic drugs for schizophrenia with negative symptoms reduces the cognitive deterioration counterpoising the neurotransmitters balances (especially GABA and Glutamate), improving the prognosis of the disorder.

## P0237

Patients preference of olanzapine orodispersible tablet compared with olanzapine conventional oral tablet in a multinational, randomized, crossover study

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**Objective:** Poor adherence to antipsychotics is a major problem in long term treatment of schizophrenia, a relationship between poor adherence and relapse is well documented in the literature. One of the factors that may affect compliance is antipsychotic formulation. The primary objective of the study was to compare patient preference for olanzapine conventional tablet (OCT) with orodispersible tablet (ODT) as measured by a formulation preference question.

**Methods:** A 12-week open label, randomized, crossover, multinational study (Turkey, Romania, Israel, Brazil, Mexico) conducted to estimate the proportion of patients preferring OCT over ODT after 6 weeks of treatment with each formulation. Outpatients with stable schizophrenia (CGI-S<4) on OCT monotherapy for at least 1 month before study inclusion were randomized 1:1. Compliance, drug attitude were measured using DAI-10 and MAF scales; tolerability and safety by AMDP-5 questionnaire and adverse event summary.