

Goal of contemporary psychiatric treatment is improvement of the quality of life of the mentally ill. Being that quality of life is of special importance for the process and final result of the mental condition, it is very important to identify factors that are responsible for the improvement or deterioration of the quality of life of the patients. Purpose of this research is a discovery of the difference in the quality of life in patients with various type of schizophrenia treated in the hospital environment. QOL was assessed with 30 female schizophrenics classified in accordance with ICD X criteria. LQOLP and BPRS were used. Paranoid schizophrenics treated in the hospital environment have higher objective and lower subjective QOL in regard to other schizophrenics.

P0245

Bactrim as an adjunctive treatment to toxoplasma-seropositive patients with schizophrenia

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Background and Aims: Several studies have shown that the level of antibodies to *Toxoplasma gondii* (*T. gondii*) in schizophrenia is higher than in controls. And it is hypothesized that the neurotropic intracellular protozoan may contribute to the development of schizophrenia. The present study is to explore whether Bactrim, which is effective to *T. gondii*, can help to treat *Toxoplasma-seropositive* patients with schizophrenia.

Methods: 99 patients who were positive in IgG or IgM antibody to *T. gondii* were separated into two groups randomly. One group received SMZco tablets (contained 400mg SMZ and 80mg TMP, 6 tablets/d) plus risperidone, and the other group received placebo and risperidone. Both the physicians and the patients did not know whether the patients took SMZco or placebo. The dosage of risperidone was titrated according to the patient's clinical symptoms and the maximum dose is 6mg/d. PANSS scales were used to assess the symptoms before and after treated for 6 weeks.

Results: There was no significant difference in the scores of PANSS at baseline and after treatment. The rate of adverse effects, and the ratio of patients who have combined with benzodiazepine and anticholinergic medicine between the two groups did not differ significantly, while two patients in the SMZ group dropped out because of serious nausea and vomiting. The maximum dosage of risperidone in the SMZ group was lower than the placebo group ($P < 0.05$).

Conclusions: For toxoplasma-seropositive patients with schizophrenia, Bactrim may be helpful by decrease the dose of the antipsychotic medicine.

P0246

First rank symptoms in schizophrenia: A cognitive examination of three explanatory models

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Background and Aims: The neuropsychological basis of first-rank symptoms in schizophrenia (FRS) is still a matter of debate. Three broad explanatory models for FRS have been proposed, each arising from a different perspective: (i) medial temporal lobes pathology (Trimble, 1990); (ii) reduced cerebral lateralisation and

interhemispheric transfer (Crow, 1997); and (iii) deficits in self-monitoring of intentions due to prefrontal inhibitory dysfunction (Frith et al, 2000). The aim of the study was to test whether patients with FRS would show deficits consistent with the above models.

Methods: A broad range of neuropsychological tests were administered to patients with and without FRS and to healthy controls, comprising tests of verbal and nonverbal memory, measures of cerebral lateralisation and interhemispheric communication, tasks of executive functioning, as well as tests of general cognitive abilities.

Results: On some cognitive tests, results were supportive of theories advocating reduced cerebral lateralisation and self-monitoring impairment. An unexpected finding was that, on many cognitive tasks, the performance of patients with FRS was better than that of patients without FRS, and not significantly different from that of controls. These results could not be accounted for by demographic features or medication effects.

Conclusion: The current study may be the most comprehensive examination of neuropsychological performance in patients with FRS to date. Our results suggest that broad cognitive impairment is not a necessary correlate of FRS.

P0247

Catechol-o-methyltransferase (COMT) is associated with negative symptoms of schizophrenia

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Background and Aims: Genetic variation of the catechol-O-methyltransferase (COMT) gene has long been thought to confer susceptibility to schizophrenia because of its catalytic activity for dopamine degradation. The negative symptom is a severe form of the illness related to prefrontal hypodopaminergia. In the present study, we attempted to perform a quantitative trait test for genetic association between the COMT gene and the negative symptoms in a Chinese population.

Methods: A total of 160 unrelated schizophrenic individuals were recruited for genetic analysis and their symptoms were assessed and scored by Positive and Negative Syndrome Scale (PANSS). The quantitative trait test was performed by the UNPHASED program to see the correlation between scored negative symptoms and some single nucleotide polymorphisms (SNPs) present in the COMT gene.

Results: rs362204 (Del/Ins SNP) showed allelic association with four negative symptoms, including blunted affect ($p=0.00008$), poor rapport ($p=0.00006$), passive/apathetic social withdrawal ($p=0.0003$) and lack of spontaneity and flow of conversation ($p=0.001$). The rs165656(C)-rs6267(G)-rs4680 (G)-rs362204 (Del) haplotype was strongly associated with both blunted affect ($p=0.0245$) and poor rapport ($p=0.0186$).

Conclusion: The present study suggests that COMT may etiologically contribute to the severity of negative symptoms of schizophrenia but its precise mechanism needs further investigating.

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A family case study on schizophrenia and bipolar disorder: Genotype and Cognition