

## EPP0590

## Psychosis: Risk Factors and Prognosis.

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**Introduction:** There are life events that may increase the possibilities of suffering some kind of Psychopathology. The most validated model for understanding the aetiology of psychosis is based on genetic and environmental risk factors and their interaction, likely involving epigenetic mechanisms. It is necessary to consider those events as risk factors for Mental Health.

**Objectives:** Study of risk and prognostic factors in psychosis.

**Methods:** Review of scientific literature based on a relevant clinical case.

**Results:** We present the case of a 28-year-old male patient from Peru, currently living in Germany. History of sexual abuse in childhood. He started taking drugs at the age of 8. In the emergency department, he reports that since the beginning of the pandemic, after listening to a speech by the Pope, he begins to interpret signals about situations occurring around him. He begins to read about mystical-religious subjects, changes the style of music he listens to and recognises changes in his personality. He says for months he has been feeling watched, persecuted and expressed someone wants to kill him. He says hears voices and that they communicate with him through bodily sensations.

**Conclusions:** Childhood trauma, immigration and cannabis use are significantly associated with an increased risk of functional psychosis. A neurotic personality also independently contributes to this risk. The accumulation of these factors increases vulnerability to mental disorders and leads to a worse prognosis and evolution of these pathologies. These findings could help to improve the prevention of psychosis and the development of specific treatment strategies in this particular population.

**Disclosure:** No significant relationships.

**Keywords:** Psychosis; substance use; risk factor; Childhood Trauma

## EPP0591

## Early Intervention for Psychosis in emerging countries: findings from a first-episode psychosis programme in Ribeirão Preto, Brazil

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**Introduction:** People presenting first-episode psychosis (FEP) benefit from early intervention programmes, although they are scarce in low- and middle-income countries (LMICs). In Brazil, there are just a few of them unequally distributed across the country.

**Objectives:** We aimed to describe the workings of the Ribeirão Preto Early Intervention for Psychosis Programme (Ribeirão Preto-EIP) – an outpatient service for first-episode psychosis patients residents in the Ribeirão Preto catchment area in Southeastern Brazil.

**Methods:** A retrospective cohort of all patients attended throughout four years (2015–2018) was analysed. We excluded patients who attended only the first consultation and those with an initial diagnosis other than a psychotic disorder. Data was obtained through retrospective analysis of medical records.

**Results:** Our service had 358 new referrals during the four-year period, and 237 patients were followed on average (median) by 14 months. Most of the patients were male (64.1%), single (84.8%), with a median age of 23.5 years (age ranged from 9 to 86 years). Schizophrenia was the main diagnosis (43.4%), followed by substance-induced (25.7%) and affective psychosis (18.6%). Taking follow-up diagnoses as gold-standard, initial diagnoses of bipolar disorder and schizophrenia spectrum disorders had the highest positive predictive values, 83% and 81% respectively. Most referrals to our programme were made by tertiary care (63.7%), followed by secondary (28.5%) and primary care (7.8%).

**Conclusions:** Here we presented a large sample of FEP patients in a representation as trustworthy to the reality of our programme as possible. Our analysis suggest that Early Intervention Programmes can be successfully implemented in LMICs.

**Disclosure:** No significant relationships.

**Keywords:** early intervention; PSYCHOTIC DISORDERS; latin america; First-episode psychosis

## EPP0592

## Modeling of affective-negative content in the course of schizophrenia

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**Introduction:** The world literature presents ambiguous results regarding the conjugation of negative and depressive syndromes, due to an incomplete understanding of the main symptoms of depression in schizophrenia.

**Objectives:** To analyze the variants of the conjugation of depressive and negative symptoms at different stages of schizophrenia.

**Methods:** We used the data of our own observations (238 patients with a diagnosis of schizophrenia and no more than 5 years of experience of the disease) and compared them with the previously published results of studies. As a hypothesis, we analyze the variants of the conjugacy of affect and the negative domain within the framework of a single discrete field of schizophrenia.

**Results:** The analysis shows that with the apparent heterogeneity of the psychopathological structure, some depressive features, such as