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Assessment of sociodemographic characteristics including employment, income and usual residence of European patients with schizophrenia: results from the Star study

L. Hanssens¹, L'Italian G.², K. Pugner¹. ¹ *Bristol-Myers Squibb Company, Braine-l'Alleud, Belgium* ² *Bristol-Myers Squibb Company, Wallingford, CT, USA*

Background and aims: To assess sociodemographic characteristics, including education, usual residence, employment status and income among schizophrenia patients in Europe.

Methods: The Client Sociodemographic and Service Receipt Inventory was evaluated in schizophrenia patients treated with aripiprazole versus standard of care (SoC). 555 patients were equally randomized to aripiprazole (10-30 mg/day) or SoC (olanzapine 5-20 mg/day, or quetiapine 100-800 mg/day or risperidone 2-8 mg/day, [up to 16 mg/day]) for 26 weeks.

Results: At baseline, 67% of the patients were single, 15% married and 12% widowed. The average years of education was 11.2: 24% of the patients received primary education or less, 50% secondary education; 21% further education and only 8% reached university. Of this population, 35% lived alone, 33% lived with relatives other than parents, and 14% lived with their husband/wife. More patients in the aripiprazole than the SoC group were employed (18.5% vs. 19.9%), while a similar proportion were unemployed (28.8% vs. 25.8%). Among the patients who work (n=105), only two have a managerial position: 35% of patients are on a state pension. The main income source across all countries was state benefit and pension (74%). Only 15% of patients had an effective salary. During the 3 months prior to baseline, patients missed ~18.5 days (50%) from work due to illness.

Conclusions: Despite improvements in the management of psychosis with second-generation antipsychotics, the social and rehabilitation aspects of schizophrenia warrant further attention.

P047

Oculomotor deficits in schizophrenia: Validation of endophenotypes in a genetically homogenous Icelandic sample

M. Haraldsson¹, U. Ettinger², B.B. Magnusdottir^{1,2}, T. Sigmundsson¹, E. Sigurdsson¹, H. Petursson¹. ¹ *Landspítali University Hospital, Reykjavik, Iceland* ² *Institute of Psychiatry, London, United Kingdom*

Background/Aims: Deficits in antisaccade and smooth pursuit eye movements are promising endophenotypes in genetic studies of schizophrenia. Patients with schizophrenia and their relatives have worse performance on these tasks compared to healthy subjects. These oculomotor impairments may be caused by the same brain dysfunctions underlying many of the symptoms of schizophrenia. This study aimed to validate antisaccade and smooth pursuit eye movements as endophenotypes in a genetically homogenous Icelandic sample to use them for studying potential risk genotypes in schizophrenia.

Method: Patients with schizophrenia (N=116) and healthy controls (N=108) matched for age and gender underwent infrared oculographic assessment (sampled at 500Hz) of antisaccades and smooth pursuit (at target velocities of 0.25, 0.50 and 0.75Hz).

Results: On the antisaccade task, patients displayed significantly more reflexive errors, longer antisaccade latency, and reduced antisaccade amplitude gain compared to controls. However, spatial error and the variability of amplitude gain and spatial error did not differ between groups. On the smooth pursuit task, patients had significantly

lower velocity gain and more frequent saccades during pursuit. Group differences in velocity gain increased with increasing target velocity. Internal consistency of performance was high for all variables in both groups except for antisaccade spatial error in patients (Cronbach's alpha >0.77 for antisaccades and >0.85 for smooth pursuit).

Conclusions: Our findings confirm the existence of robust oculomotor deficits in schizophrenia in a large sample. These measures can therefore be used as valid endophenotypes in future studies of potential schizophrenia risk genotypes in the genetically homogenous Icelandic population.

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Conceptual problems with early detection of prodromal psychosis

M. Heinimaa. *Department of Psychiatry, University of Turku, Turku, Finland*

Background and aims: The prospect of early identification of psychotic development before the first overt psychosis confronts us with novel problems, not encountered in clinical work with psychotic patients. The target of prevention, usually "psychosis", is a fuzzy concept with indeterminate boundaries and unclear content. Consequently, the prospective setting of early detection and intervention is rife with problems both of conceptual (What are the meanings inherent in the diagnostic concepts we use?) and of ethical (What are the consequences thereof?) nature. In this paper I will discuss the grammatical features of various conceptualizations of pre-stages of psychotic disorders, specifically their clinical, nosological and existential significance. This discussion has relevance for both diagnostic practices and ethical debate on the early intervention agenda.

Methods: Conceptual analysis. Material source for this analysis was representative literature and publications from the time period 1990-2006. Five different conceptualizations of pre-stages of psychotic disorders were investigated as to their their clinical, nosological and existential significance.

Results: "At-risk-mental state" emerged as the most prudent and contextually relevant formulation of psychosis risk in preventive setting as it implies clinical significance, is nosologically a weak concept and does not directly imply mental disorderedness or psychoticism, thus retaining some degree of existential neutrality. The shortcomings of other available options were described.

Discussion: This conceptual analysis provides us with a meaningful tool for distinguishing the differential clinical, nosological and ethical implications of available (forthcoming) conceptualizations of early stages of psychosis.

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Acute phase proteins and personality disorders in schizophrenia

M. Henry^{1,2}, A.L. Morera², A. Garcia-Hernandez², A. Orozco^{1,2}, E. Diaz^{2,3}, T. Rodriguez-Martos^{1,2}, M. Martin^{1,2}, L. Fernandez¹, C.R. Morales^{1,2}, M. Sangines¹, R. Gracia^{1,2}. ¹ *University Hospital of the Canary Islands, Ofra, La Laguna, Tenerife, Spain* ² *Department of Internal Medicine, Dermatology and Psychiatry, La Laguna Medical School, Ofra, La Laguna, Tenerife, Spain* ³ *University Hospital NS DeLa Candelaria, Santa Cruz, Tenerife, Spain*

Introduction. Interest in the premorbid personality of schizophrenic patients is well established in the psychiatric literature. The relationship between personality disorders and acute phase proteins (APP) in schizophrenia is not well known.

Aim. Investigating the relationship among acute phase proteins and personality disorders in schizophrenic patients in a sample of adult schizophrenic patients under psychiatric treatment in a general hospital health setting.

Material and Methods. 37 adult paranoid schizophrenics undergoing treatment in the University Hospital of the Canary Islands with DSM-IV diagnosis of paranoid schizophrenia are included. Years from onset 9.20 s.d. 6.29, age at onset 19.75 s.d. 4.73. The record of personality disorders as a secondary diagnosis in the medical chart was taking into account. A blood sample as routine standard analysis was carried out in each patient.

Results. In 21 patients (56.7%) a personality disorder, mainly with paranoid and schizotypal traits, was registered. The percentage of each personality disorder is as follows, Schizotypal (16.2%), Paranoid (13.5%), Schizoid (2.7%), Paranoid and Schizotypal (24.3%). The results point to no significant correlation according to APP (C3, C4, alpha2-macroglobulin, alpha1-glicoprotein, ceruloplasmin) in the different diagnostic groups.

Discussion and conclusions. In our study there is no evidence to support a significant correlation among APP and the different personality disorders in our sample of schizophrenics in spite of a positive correlation of APP and some psychopathology dimensions that has been communicated earlier elsewhere. In order to set some possible specificity of acute phase proteins and other clinical features in schizophrenia further research is required.

P050

Study of the COMT gene in Spanish patients with schizophrenia

J. Hoenicka, L. Espana, X. Alvira-Botero, R. Rodriguez-Jimenez, J. Diez, M.A. Jimenez-Arriero, T. Palomo, PARG. *Servicio de Psiquiatria, Hospital 12 de Octubre, Madrid, Spain*

Background and aims: The enzyme catechol-O-methyl transferase (COMT) is significantly involved in dopamine's catabolism, especially in the prefrontal cortex. The association between several schizophrenic phenotype traits and the presence of prefrontal hypodopaminergia is well known. The purpose of this study was to determine if variations in the gene that encodes this enzyme constitute a risk factor for the development of schizophrenia in our Spanish patient sample.

Methods: the study included a total of 199 Spanish male DSM-IV-TR schizophrenic patients and a sample of 186 male healthy controls. Genotyping was performed using Single Strand Conformation Polymorphism (SSCP) of amplified fragments by DNA polymerase chain reaction (PCR). Statistical analysis was done using SPSS (V. 11.0), PHASE (V. 2.0) software and Genetic Data Analysis (GDA).

Results: our results indicate that the homozygous genotypes for Val108/158Met polymorphism are more prevalent in schizophrenic patients than in control population (62% vs. 50%; $p = 0.04$); regarding the C610G polymorphism, no differences were observed in this sample.

Conclusions: our findings warrant the study of COMT gene in independent samples in order to establish the possible correlation of variants of this gene and the development of schizophrenia in Spanish male population.

P051

The high prevalence of undiagnosed metabolic complications in people with severe mental illness

R.I.G. Holt¹, R.C. Peveler². ¹ *Endocrinology and Metabolism Unit, University of Southampton, Southampton, United Kingdom* ² *Community Clinical Sciences Division, University of Southampton, Southampton, United Kingdom*

Background: The prevalence of metabolic syndrome is increased 2-3 fold in people with severe mental illness (SMI) yet monitoring of physical health in the individuals is poor, despite clear guidance from NICE.

Aim: To assess whether monitoring of metabolic complication of people with SMI had occurred within the last year. To assess the prevalence of undiagnosed metabolic syndrome in SMI

Methods: 100 patients with SMI involving both community and in-patient settings were audited. The prevalence of metabolic syndrome was assessed in 50 previously unmonitored patients.

Results: In the audit, the 100 psychiatric notes had details of the following assessments: blood pressure ($n=32$), glucose ($n=16$), lipids ($n=9$) and weight ($n=2$). Twenty-six of 50 (52%) patients were subsequently found to fulfil the IDF definition for metabolic syndrome. Three had previously undiagnosed diabetes based on fasting glucose concentration. Metabolic syndrome was associated with increasing age ($p=0.03$) but not clinical setting, diagnosis, antipsychotic medication, gender, smoking status, alcohol or illicit drug use. 22% of patients had a family history of diabetes.

Conclusion: There is a high prevalence of undiagnosed metabolic syndrome in people with SMI. Improved screening of metabolic complications should lead to better identification and treatment of this clinical problem.

P052

New functional single nucleotide polymorphism (Ala72Ser) in the comt gene is associated with aggressive behavior in male schizophrenia

J.P. Hong, S.H. Chung, C.Y. Kim. *Department of Psychiatry, Asan Medical Center, Seoul, South Korea*

Background: A new functional Single Nucleotide Polymorphism (Ala72Ser) in the COMT Gene was discovered recently. The purpose of our study is to examine the association between Ala72Ser and Val158Met functional polymorphisms in COMT gene and homicidal behavior in schizophrenia.

Methods: DNA was genotyped for the Ala72Ser and Val158Met SNPs of the COMT gene in a sample of 90 schizophrenic patients who committed homicide (H-SCZ) and 83 schizophrenic patients who had never committed homicide (NH-SCZ).

Results: A statistically significant difference was found in genotype distribution and allele frequencies in SNP Ala72Ser of COMT gene between H-SCZ and NH-SCZ group. In haplotype analysis, the frequency of the combination of high-high activity allele (Ala-Val) was fewer in H-SCZ group than in NH-SCZ group ($p=0.000657$).

Conclusions: Our study showed a highly significant association between a COMT haplotype of two functional SNP and aggressive behavior in schizophrenia.

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Time to clinical stabilization and discharge from hospital treatment of patients with schizophrenia after conversion to long-acting risperidone (RIS-CONSTA), ris-siv-401