

Introduction: People with severe psychiatric disorders (SPD) who experience housing vulnerability have to negotiate discontinuous mental health care pathways including poor access to common rights services and an increased risk of incarceration. To reduce morbidity and improve social integration of these people, Médecins du Monde (NGO), in association with the Ministry of Justice and APHM, is piloting the experimentation of an alternative to prison through assertive community treatment (ACT) and independent housing for people with SPS without housing who are referred to the court for immediate appearance.

Objectives: The main objective is to evaluate the effectiveness of the innovative program (AIISSI) compared to usual services by assessing the duration of re-incarceration at 18 months of follow up.

Methods: The AIISSI project has been certified as a Social Impact Bond, in which private investors support the program, with the guarantee that the French government will reimburse the investments if social impact outcomes are met. To measure the effectiveness and efficiency of the program, a randomized controlled study was designed: 100 patients will be included in the AIISSI group (intervention) and 120 in the TAU group (usual services). Four social impact outcomes are identified: inclusion rate, signed leases rate, total length of re-incarceration and total resource use. It is a mixed quali-quantitative research, which integrates a matching to administrative health and judicial databases.

Results: Inclusions are ongoing.

Conclusions: The AIISSI program and the research methods used are described herein. In addition, detailed information on the limitations and strengths of the SIB system are also discussed.

Disclosure: No significant relationships.

Keywords: Social Impact Contract; Incarceration; housing insecurity; Severe Mental Disorders

EPV1303

Facial emotion recognition deficits in first-degree relatives of patients with bipolar disorder: a systematic review protocol

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Introduction: Bipolar Disorder (BD) is one of the most challenging and severe psychiatric disorders. Considerable research in BD patients points to deficits in Facial Emotion Recognition (FER) as a potential BD endophenotype. Accordingly, such deficits have also been found in unaffected BD first-degree relatives, but no study has been conducted to synthesize this evidence.

Objectives: To conduct a systematic review of studies exploring FER deficits in first-degree relatives of patients with BD.

Methods: PRISMA 2020 recommendations will be followed. PubMed, Scopus, Web of Science and SciELO electronic bibliographic databases will be searched, as well as grey literature. Reference lists of the included studies will be hand-searched for

additional eligible studies. Search strategy will include key-terms in accordance with the pre-established PICOS definition. No restrictions will apply regarding study design, setting, publication date nor language. Outcomes of interest will be FER deficits. Retrieved studies will be screened for eligibility by two independent reviewers using a two-phase approach. The methodological quality of primary studies will be assessed and data extracted independently using a standardized extraction form.

Results: will be described using narrative and tabular approaches. Studies heterogeneity will be verified and if adequate a meta-analysis will be conducted. Findings will be disseminated through a peer-reviewed publication.

Conclusions: It is expected that this systematic review will support the hypothesis that FER deficits may constitute a potential candidate for a BD endophenotype, which will not only improve the understanding of BD neurobiology, but also enable its identification in earlier stages, allowing timely treatments and better patients' outcomes.

Disclosure: No significant relationships.

Keywords: Facial Emotion Recognition deficits; First-degree relatives; systematic review; bipolar disorder

Schizophrenia and other Psychotic Disorders

EPV1305

Association between lymphocytes, hippocampus volume and depressive symptoms in drug – naïve First Episode Psychosis

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Introduction: The role of the white blood cells, which form the peripheral immune system and are crucial in inflammatory processes, has been laid aside in the context of brain structural changes in schizophrenia.

Objectives: Determine how blood cells are associated with some brain structures volumes in first episode psychosis (FEP) and their relationship with clinical variables at baseline and 1 year follow – up.

Methods: Fifty *drug-naïve* FEP treated between April 2013 and July 2017 at the ETEP Program at Hospital del Mar were included. Inclusion criteria were: 1) age 18-35 years; 2) fulfillment of DSM-IV-TR criteria for brief psychotic disorder, schizophreniform disorder, schizophrenia or unspecified psychosis; 3) no previous history of severe neurological medical conditions or severe traumatic brain injury; 4) presumed IQ level > 80, and 5) no substance abuse or dependence disorders except for cannabis and/or nicotine use. All patients underwent an assessment at baseline and at one-year follow-up, including sociodemographic and clinical variables (substance use, DUP, PANSS, GAF and CDSS). Fasting blood samples were obtained before administering any medication at baseline. Structural T1 MRI was performed

at baseline and brain volumes were quantified through FreeSurfer software. SPSS program was used for statistical analyzes.

Results: Lymphocytes have a positive correlation with right and left hippocampus at baseline. Moreover, lymphocytes have a negative correlation with depressive symptoms at baseline and 1 year follow – up.

Conclusions: Lymphocytes may have a protective effect in some brain structures in FEP patients at baseline, especially those implicated in depressive symptoms.

Disclosure: No significant relationships.

Keywords: Lymphocytes; First Episode Psychosis; Hippocampus; schizophrénia

EPV1307

The relationship between treatment motivation, coping, and psychosocial functioning in a schizophrenia patient's sample

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Introduction: Schizophrenia is characterized by impairments in motivation and coping and decrements in psychosocial functioning in major life areas.

Objectives: This study attempted to examine the links between treatment motivation, coping, and psychosocial functioning for persons with schizophrenia. Design: Cross-sectional survey.

Methods: One hundred thirty-eight participants were recruited at random from outpatient psychosocial rehabilitation programs in Moscow-based psychiatric hospitals. The measures of motivation were administered by testers blind to scores on other study variables; measures of coping (COPE, CERQ) and psychosocial functioning (PSP, EQ5D5L, SF36, Q-Les-Q-18) were administered. Data were analyzed using latent construct modeling to test for mediator and moderator effects.

Results: There were strong bivariate relationships between coping, motivation, and psychosocial functioning. The results demonstrated that coping strongly mediated the relationship between motivation and psychosocial functioning. This mediation was evidenced by: 1) the direct path from motivation to a functional outcome no longer being statistically significant after introducing coping into the model; 2) the statistical significance of the indirect path from motivation through coping to functional outcome. There was no support for the moderation hypotheses.

Conclusions: Motivation influences psychosocial functioning through its relationship with coping, and coping is a critical mechanism for explaining the relationship between motivation and psychosocial functioning. These results will be compared with work on motivation, neurocognition, and psychosocial functioning in schizophrenia (Nakagami et al. 2008), as well as with gender issues. Professionals working with schizophrenia patients should consider

such variables as coping when designing and implementing gender-sensitive intervention programs.

Disclosure: No significant relationships.

Keywords: Psychosocial functioning; coping; schizophrénia; Treatment motivation

EPV1308

Longitudinal association between exposome score for schizophrenia and clinical features: results from the Athens First-Episode Psychosis Research Study

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Introduction: Previously, environmental vulnerability for schizophrenia assessed through exposome score for schizophrenia (ES-SCZ) was associated with the risk for psychosis development.

Objectives: The current study aims to investigate the longitudinal association between ES-SCZ and symptom severity in individuals with first episode psychosis (FEP) to understand how environmental exposures affect illness course.

Methods: Baseline and 1-month follow-up assessments were available for 225 individuals with FEP from the Athens FEP Research Study. The Positive and Negative Syndrome Scale (PANSS) was used to measure clinical features. In accordance with previous reports, the ES-SCZ was calculated by summing log-odds weighted environmental exposures (childhood adversities, winter birth, and cannabis use). To model the course of clinical features over time the effects of the ES-SCZ-by-time interaction, ES-SCZ, and time were analyzed with multilevel regression analyses. Age, sex, and education were added as covariates

Results: The analyses of change of PANSS total score over time indicated that clinical features decreased from baseline to the 1-month follow-up assessment. The association between ES-SCZ and PANSS total score were not statistically significant. The analyses of the PANSS total score over time indicated an ES-SCZ-by-time interaction ($B = 2.82$ [95% CI 0.28; 5.35], P -value = 0.029), meaning the decrease of the PANSS total score over time were dependent on ES-SCZ and individuals with high ES-SCZ showed less improvement

Conclusions: The findings show that the total environmental predisposition to schizophrenia (ES-SCZ) not only increases the risk for psychosis development but may also influences the illness course.

Disclosure: No significant relationships.

Keywords: environmental exposures; clinical features; exposome; Psychosis