Introduction: Depressive symptoms are a common occurrence in people suffering from schizophrenia spectrum disorders (SSDs), representing a separate domain that interacts in peculiar ways with positive and negative symptoms. Nonetheless, available evidence on the relationship between depression and key clinical dimensions of SSDs is limited.
Objectives: To increase the knowledge regarding depression in SSDs, we performed a cross-sectional study aimed to investigate the association of depressive symptoms with overall, general psychopathology, positive, and negative symptoms in individuals with SSDs.
Methods: Adult people with SSDs were recruited from two psychiatric inpatient units in the northern area of the Metropolitan City of Milan from May 2020 to March 2023. Study participants with a Calgary Depression Scale for Schizophrenia score >6 were rated as depressed. Symptom severity was assessed by using the Positive and Negative Syndrome Scale (PANSS). Variables associated with depression at the univariate level were included into two multiple logistic regression models to analyse the association between depression and PANSS overall score as well as General Psychopathology, Positive, and Negative sub-scores.
Results: A total of 231 subjects with SSDs were included. Among them, approximately one third (N=78; 33.8%) reported depressive symptoms. Multiple logistic regression models suggested that depression in individuals with SSDs was associated with higher overall ($p<0.001$) and General Psychopathology ($p<0.001$) PANSS scores. Conversely, an inverse relationship between depression and positive symptoms was found ($p=0.002$). Negative symptoms were not associated with depression ($p=0.210$).
Conclusions: Our findings suggest that people affected by comorbid SSDs and depression have more severe overall and General Psychopathology symptoms according to PANSS scores, as well as lower levels of positive symptoms. Further investigations are needed to evaluate the generalisability of these findings and to improve the clinical management of people with SSDs and depression.

Disclosure of Interest: None Declared

EPP0720

Relation between the first psychotic episode in schizophrenia patients and IL-1β plasma levels – Serbian population study

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Introduction: According to immunological theories of schizophrenia prenatal and postnatal exposure to pathogens may contribute to the etiopathogenesis, suggesting that chronically activated immune system cells (macrophages and T lymphocytes) constantly secrete proinflammatory cytokines which affect the development and function of central nervous system.
Objectives: In the present work we aimed to evaluate IL-1β plasma levels in schizophrenic patients during their first psychotic episode and to compare the obtained results to those from healthy subjects.
Methods: Plasma was obtained from 32 drug-naive schizophrenic patients, without history of substance abuse or addiction, immediately after their admission to the medical ward, while the control samples were obtained from 20 healthy volunteers.
Results: Levels of IL-1β were measured using ELISA assay, which measures IL-1β protein in a range from 7.81 to 500 pg/ml. Results revealed that the levels of IL-1β in patients with first psychotic episode were not increased and were below the limit of detection in all studied samples. The same was found in the samples belonging to the control group.
Conclusions: These data contribute to the poll of knowledge and a still unresolved dogma about the etiopathogenesis of schizophrenia since the results obtained by some studies are also questioning this marker. Thus, whether or not an increase of IL-1β is congenital, acquired during the prodromal phase or absent until the time of first psychotic episode has not yet been investigated.

Disclosure of Interest: None Declared

EPP0721

Increased emergency room visits without corresponding rehospitalizations in cannabis users with psychosis

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Introduction: Epidemiological studies have established a complex relationship between cannabis consumption and a heightened risk of psychotic disorders, including schizophrenia. However, this connection is multifaceted, influenced by genetics, environment, and individual psychology. Surprisingly, despite a surge in emergency room (ER) visits associated with cannabis consumption and psychosis, there haven't been significant increases in hospital readmissions. This rise in ER visits can be attributed to the increasing social acceptance of cannabis and its legalization in some regions, increasing the likelihood of adverse effects. Furthermore, the higher potency of contemporary cannabis can trigger psychotic reactions, particularly in those consuming elevated levels of THC, its primary psychoactive component.
Objectives: This study aimed to compare the rates of readmissions and ER visits one year after hospital discharge among patients diagnosed with schizophrenia and other psychotic disorders, stratified by cannabis consumption.