

been accepted as a valuable outcome measure in many psychiatric conditions; thus, identification of contributing factors may help to improve overall outcome. Moreover, close monitoring of adverse effects of illness on QoL in healthy siblings may become a part of larger prevention strategies.

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#### Reference

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#### EW0481

### Diagnosis of predominant negative symptoms: Post-hoc analyses of a phase 3 clinical trial with cariprazine monotherapy and risperidone

I. Laszlovszky\*, Á. Barabásky, E. Szalai, B. Szatmári, J. Harsányi, G. Németh

Gedeon Richter Plc, Medical Division, Budapest, Hungary

\* Corresponding author.

*Objective* To present, post hoc analyses from a controlled, prospective study of predominant negative symptoms (PNS) of schizophrenia on baseline patient characteristics, severity of symptoms and their variability among participating countries.

*Methods* Data were analyzed from a phase 3, randomized, double-blind, active-controlled, parallel-group study in adult PNS patients with schizophrenia (EudraCT Number 2012-005485-36). Subjects with a PANSS factor score for negative symptoms (PANSS-FSNS)  $\geq 24$  and no pseudo-specific factors (e.g. high positive symptoms, extrapyramidal symptoms, depression) were randomized to cariprazine 4.5 mg/d (dose range: 3–6 mg/d) or risperidone 4 mg/d (dose range: 3–6 mg/d) for 26 weeks. Baseline values of PANSS-FSNS, individual PANSS items, personal and social performance (PSP), and clinical global impression of severity (CGI-S) were analyzed based on the data gained from 11 European participating countries.

*Results* Average PANSS-FSNS of patients was  $27.6 \pm 2.48$ , reflecting severe negative symptoms. Patients were moderately ill (CGI-S  $4.2 \pm 0.75$ ), with marked difficulties (PSP  $48.4 \pm 10.78$ ) predominantly in social functioning. The investigated patient population was fairly homogeneous as shown by small variability in all three scores. Moreover, baseline values in the 11 countries presented low variability while number of enrolled patients per country showed high variance ( $n = 7–118$ ). Narrative description of symptoms and individual PANSS items rated as most severe and prominent were in high correlation.

*Conclusion* Post hoc evaluation of this predominant negative symptom study showed that, this patient population can be identified reliably by psychiatrist. Additional training on the judgment of personal and social relationships can increase the diagnostic accuracy.

*Disclosure of interest* Employee of Gedeon Richter Plc.

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#### EW0482

### Day-to-day and social functioning of patients with negative symptoms of schizophrenia: Post-hoc analyses of a phase 3 clinical trial with cariprazine monotherapy and risperidone

Á. Barabásky\*, I. Laszlovszky, B. Szatmári, E. Szalai, J. Harsányi, G. Németh

Gedeon Richter Plc, Medical Division, Budapest, Hungary

\* Corresponding author.

*Introduction* Negative symptoms have substantial impact on day-to-day functioning of patients with schizophrenia affecting their ability to perform activities of daily living and to maintain personal relationships.

*Objective* To present post hoc data on day-to-day and social functioning of patients with predominant negative symptom (PNS) of schizophrenia, treated with cariprazine versus risperidone.

*Methods* Data from 26 weeks, phase 3, randomized, double-blind, active-controlled study in PNS patients were analyzed (EudraCT 2012-005485-36). Subjects with PNS (PANSS factor score for negative symptoms  $\geq 24$ ) were randomized to cariprazine 4.5 mg/d or risperidone 4 mg/d. Change from baseline to end of treatment on the personal and social performance scale (PSP) and PANSS prosocial subscale (P3, P6, N2, N4, N7, G16) was analyzed.

*Results* Significantly greater improvements were seen with cariprazine compared to risperidone in the change from baseline to end of treatment on the PSP (LSMD + 4.632 [2.71, 6.56];  $P < 0.001$ ) from week 10 onwards (effect size 0.48); in the PSP subdomains of self-care (LSMD  $-0.2$  [ $-0.3$ ;  $-0.1$ ];  $P = 0.004$ ), personal and social relationships (LSMD  $-0.2$  [ $-0.4$ ;  $-0.1$ ];  $P < 0.001$ ) and socially useful activities (LSMD  $-0.4$  [ $-0.5$ ;  $-0.2$ ];  $P < 0.001$ ); in the number of patients who improved at least 10 points on the PSP (OR 2.1;  $P = 0.001$ ) or shifted to a higher category (OR 2.2;  $P = 0.001$ ); and on the PANSS prosocial subscale (LSMD  $-0.8$  [ $-1.41$ ,  $-0.16$ ];  $P = 0.014$ ).

*Conclusion* Post hoc evaluation of this study showed that cariprazine treatment is associated with a clinically relevant improvement in patient functioning and social competence compared to risperidone.

*Disclosure of interest* Employee of Gedeon Richter Plc.

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#### EW0483

### The relationship between negative symptoms and cognitive functioning in patients with an at risk mental state for psychosis

L. Leanza\*, L. Egloff, E. Studerus, C. Andreou, U. Heitz, K. Beck, S. Menghini-Müller, S. Ittig, A. Riecher-Rössler

University of Basel Psychiatric Hospital, Center for Gender Research and Early Detection, Basel, Switzerland

\* Corresponding author.

*Introduction* Negative symptoms and cognitive impairments are both present in patients with an at risk mental state (ARMS) for psychosis and negatively affect functioning and outcome. According to previous studies in patients with first-episode psychosis, negative symptoms are negatively associated with cognitive functioning while positive symptoms do not seem to be associated. Yet, little is known about the specific relationship of negative symptoms and cognitive functioning in ARMS patients.

*Objective* To evaluate, the relationship between negative symptoms and cognitive functioning in ARMS patients.

*Methods* Data of 154 ARMS patients were collected within the prospective Basel early detection of psychosis (FePsy) study. Negative symptoms were assessed with the SANS, positive psychotic symptoms with the BPRS, cognitive functioning with an extensive neuropsychological test battery. Multiple regressions were applied and results were controlled for age and gender.

*Results* Regression analyses showed a significant, negative association between negative but not positive psychotic symptoms and cognitive functioning, showing the strongest association with verbal fluency (see Fig. 1). However, results mainly did not withstand correction for multiple testing.

**Conclusions** The association found between verbal fluency and negative symptoms may be indicative of an overlap between those constructs. Finally, verbal fluency might have a strong influence on the clinical impression of negative symptoms, especially on alogia.

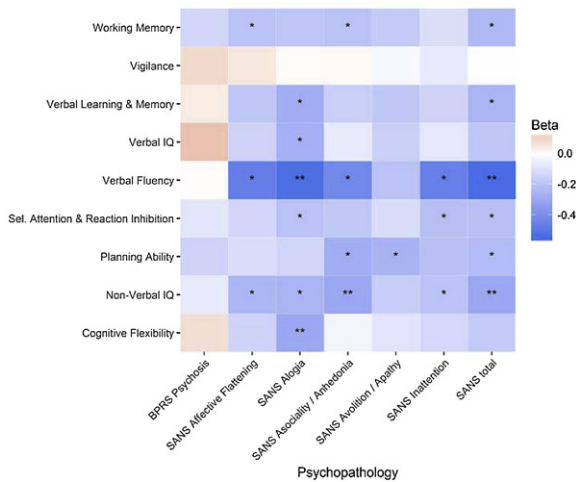


Fig. 1 Cognitive variables associated with psychopathological symptoms. \*P.05; \*\*P.01.

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#### EW0484

### Schizophrenia and pregnancy: The tactics of management

S. Lukmonov\*, G. Ruzieva, I. Nazarova

Tashkent Medical Academy, psychiatry and narcology, Tashkent, Uzbekistan

\* Corresponding author.

**Purpose** The study of literature data of the treatment of pregnant women with schizophrenia and making recommendations on the management of this category of patients.

**Methods** Theoretical analysis of a number of scientific works of foreign researchers, which studied questions of application of psychotropic drugs in patients with schizophrenia during pregnancy.

**Discussion** The important source of problems for patients with schizophrenia is a protection against pregnancy. The number of children born in mentally ill mothers has increased at least three times. Hereditary factors in children born from two parents with schizophrenia plays, an important role: approximately 46–68% of these children may develop schizophrenia. In studies on psychotic means, there were no increase in number of anatomical anomalies or deviations in the development associated with this treatment. Low doses do not have a deleterious effect on fetal body weight, duration of pregnancy, fetal or neonatal mortality, as well as the frequency of malformations and deformities. Neither oral nor deposited anti-psychotic drugs are not associated with malformations and malformations of the fetus.

**Conclusion** (1) The drugs should be administered at the lowest effective dose for the shortest possible time and decrease in the dose during the last days before the birth. (2) Pregnant women with acute psychotic disorders are dangerous, both for herself and for the child. (3) After the birth due to high risk of recurrence or exacerbation of schizophrenia taking anti-psychotic drugs should be in full dose.

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#### EW0485

### Alteration of cerebral blood flow measured with SPECT in patients with first episode psychosis

P. Makarić<sup>1,\*</sup>, D. Bošnjak<sup>2</sup>, I. Kekin<sup>3</sup>, P. Jelacic<sup>4</sup>, M. Hauptert<sup>4</sup>, N. Đuran<sup>4</sup>, M. Sisek-Šprem<sup>5</sup>, D. Perušić<sup>4</sup>, P. Brečić<sup>6</sup>, R. Petrović<sup>7</sup>, M. Rojnić Kuzman<sup>3</sup>

<sup>1</sup> University Psychiatric Hospital Vrapče, The Addictions Department, Zagreb, Croatia

<sup>2</sup> University Psychiatric Hospital Vrapče, First Psychosis Unit, Zagreb, Croatia

<sup>3</sup> Zagreb University Hospital Centre, Department of Psychiatry, Zagreb, Croatia

<sup>4</sup> University Psychiatric Hospital Vrapče, Department of Psychotic Disorders, Zagreb, Croatia

<sup>5</sup> University Psychiatric Hospital Vrapče, Department of Psychogeriatrics, Zagreb, Croatia

<sup>6</sup> University Psychiatric Hospital Vrapče, Department of Affective Disorders, Zagreb, Croatia

<sup>7</sup> Zagreb University Hospital Centre, Department of nuclear medicine, Zagreb, Croatia

\* Corresponding author.

**Introduction** Single-photon emission computed tomography (SPECT) is a valid method for measuring regional cerebral blood flow (rCBF). Recent studies regarding rCBF in patients with first episode psychosis (FEP) reported heterogeneous results, but were limited with small sample size. Neuroimaging can help us in setting the diagnosis of illness, as well as in following the progress and finding more effective treatment for psychotic disorders.

**Objectives** To compare, baseline alterations of the rCBF using SPECT with psychopathological status in FEP during acute phase.

**Aims** To investigate the changes of rCBF in patients with FEP during acute phase.

**Methods** We conducted a study on 40 drug-naïve patients with FEP at acute phase of illness during their hospitalization at Zagreb University hospital centre. The diagnosis was confirmed using diagnostic and statistical manual of mental disorders, fifth edition. rCBF was measured with SPECT and psychopathological status rated with the Positive and Negative Syndrome Scale.

**Results** Our findings showed moderate to severe parieto-temporal perfusion deficits, mild to moderate parieto-fronto-temporal perfusion deficits or borderline perfusion deficits in all but one patient.

**Conclusion** Our results showed alteration in rCBF at the beginning of the illness that indicate a biological marker of psychotic disorder.

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#### EW0486

### Treatment adherence in psychosis: A 2 years follow-up of first-psychotic episode patients

S. Malta Vacas\*, R. Carvalho, M.J. Heitor

Hospital Beatriz Ângelo, Psychiatry and Mental Health, Lisboa, Portugal

\* Corresponding author.

**Introduction** Much research on psychosis has focused on early detection and the development of effective interventions. However, the effectiveness of any intervention depends on the willingness of the patient to engage with an intervention in a sustained manner. Disengagement from treatment by patients with serious mental illness is a major concern of mental health services.

**Objectives** This study aims to examine the prevalence of disengagement in a longitudinal cohort of first episode psychosis (FEP) patients.