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#### EW0803

### Using junior doctors to improve patient care: Creating a clinic to monitor the physical health of patients prescribed clozapine

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**Introduction** In the United Kingdom, compliance with guidelines on physical health monitoring of patients prescribed clozapine is poor. Our community team established a 'clozapine clinic', led by junior doctors, to monitor the physical health of this population.

**Aims** The aims of this audit were:

- to ascertain levels of compliance with guidelines on the physical health monitoring of patients taking clozapine;
- to compare the current level of compliance with that prior to the establishment of the clinic.

**Methods** Eleven standards were drawn from National Institute for Health and Care Excellence guidelines and the Maudsley Prescribing Guidelines in Psychiatry.

Three audit cycles were conducted: two prior to the establishment of the clinic and one after. In each cycle, searches of patient records were conducted and blood results were reviewed. This was supplemented by telephone calls to general practitioners to ensure a complete data set.

Analysis was conducted in Microsoft Excel™ and changes between the cycles were analysed using a two-tailed Z-score.

**Results** Each audit cycle included 28–30 patients. In the current cycle compliance levels varied between 66% (annual ECG recording) and 100% (monthly full blood count). The average compliance level was 73% across all standards. This represents an overall improvement on previous audit cycles. Since the clinic was established there has been a statistically significant improvement in compliance with annual monitoring of weight ( $P=0.147$ ), body mass index ( $P=0.0178$ ), and ECG monitoring ( $P=0.0244$ ).

**Conclusions** Improvements in the care of a vulnerable population may be achieved through setting clear standards, regular audit, and harnessing the leadership and enthusiasm of junior doctors.

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#### EW0804

### Enhancement of flexible cognition in autism

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Autism is defined by qualitative deficits in communication, social interaction and restricted patterns of interests and behavior. There are also reported difficulties in the dynamic activation and modification of cognitive processes in response to changes in tasks demands. It is assumed that poor flexible cognition is related to those difficulties. This research aimed to assess and intervene in cognitive flexibility in subjects with autism.

Ten subjects diagnosed with autism by psychiatrists, aged 5y to 13y5m, were assessed in cognitive flexibility through WCST in pretest and in patterns of social interactions, behaviors and com-

munication through ADI-R. An intervention program with 14 to 21 sessions designed to enhance cognitive flexibility through activities of local coherence inference, constructive praxis, attentional shifting, inhibitory control, besides drama games after reading stories. In posttest, they were assessed in WCST and ADI-R. Raw scores of categories completed and perseverative errors and responses were used.

Regarding flexible cognition, perseverative errors and responses were lower in posttest ( $P=0.028$ ). Categories completed were improved in posttest ( $P=0.049$ ). Total scores on ADI-R were lower in posttest ( $P=0.051$ ) and as well as scores on communication abilities ( $P=0.033$ ).

The qualitative improvement showed by the individuals of this research concerning flexible cognition and also patterns of restricted behavior, social interaction and communication abilities suggests that individuals with autism can benefit from the development of strategies for the rehabilitation of flexible cognition and more research is suggested with a larger sample among subjects on the autism spectrum.

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## e-Poster Walk: Schizophrenia and other psychotic disorders – Part 5

#### EW0805

### Awareness of and satisfaction with available treatment options in schizophrenia: Results from a survey of patients and caregivers in Europe

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**Introduction** Understanding beliefs and concerns of patients with schizophrenia and their caregivers, regarding treatment options, is key to improving their care. Perceived fears can impact adherence to therapy and represent a barrier to prescribers when discussing treatment decisions.

**Objectives** Explore patient and caregiver awareness of and satisfaction with available treatment options.

**Methods** Independent market research agency commissioned by Janssen, performed an online European survey in 2016 to capture demographics, awareness of available therapies, current treatment satisfaction and adherence from patients with schizophrenia and caregivers.

**Results** Results from 166 patients with schizophrenia and 468 caregivers from 12 European countries (France, Germany, UK, Italy, Spain, Denmark, Russia, Sweden, Austria, Belgium, Switzerland, and the Netherlands). One-fifth of patients reported they have not discussed alternative treatment options with their healthcare professional (HCP) despite 37% of patients being dissatisfied or very dissatisfied with their current therapy. HCPs were considered as the primary information source for the majority of patients (73%), although 27% of patients and 25% of caregivers believed that HCPs were not fully aware of all available treatment options. Moreover, 68% of patients treated with oral antipsychotics confirmed they would consider switching to a long-acting antipsychotic treatment, though 32% reported they have not been made aware of it as an