EPP0592

Psychosis: Risk Factors and Prognosis.

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Introduction: There are life events that may increase the possibilities of suffering some kind of Psychopathology. The most validated model for understanding the aetiology of psychosis is based on genetic and environmental risk factors and their interaction, likely involving epigenetic mechanisms. It is necessary to consider those events as risk factors for Mental Health.
Objectives: Study of risk and prognostic factors in psychosis.
Methods: Review of scientific literature based on a relevant clinical case.
Results: We present the case of a 28-year-old male patient from Peru, currently living in Germany. History of sexual abuse in childhood. He started taking drugs at the age of 8. In the emergency department, he reports that since the beginning of the pandemic, after listening to a speech by the Pope, he begins to interpret signals about situations occurring around him. He begins to read about mystical-religious subjects, changes the style of music he listens to and recognises changes in his personality. He says for months he has been feeling watched, persecuted and expresed someone wants to kill him. He says hears voices and that they communicate with him through bodily sensations.
Conclusions: Childhood trauma, immigration and cannabis use are significantly associated with an increased risk of functional psychosis. A neurotic personality also independently contributes to this risk. The accumulation of these factors increases vulnerability to mental disorders and leads to a worse prognosis and evolution of these pathologies. These findings could help to improve the prevention of psychosis and the development of specific treatment strategies in this particular population.

Disclosure: No significant relationships.
Keywords: Psychosis; substance use; risk factor; Childhood Trauma

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Early Intervention for Psychosis in emerging countries: findings from a first-episode psychosis programme in Ribeirão Preto, Brazil

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Introduction: People presenting first-episode psychosis (FEP) benefit from early intervention programmes, although they are scarce in low- and middle-income countries (LMICs). In Brazil, there are just a few of them unequally distributed across the country.
Objectives: We aimed to describe the workings of the Ribeirão Preto Early Intervention for Psychosis Programme (Ribeirão Preto-EIP) – an outpatient service for first-episode psychosis patients residents in the Ribeirão Preto catchment area in Southeastern Brazil.
Methods: A retrospective cohort of all patients attended throughout four years (2015-2018) was analysed. We excluded patients who attended only the first consultation and those with an initial diagnosis other than a psychotic disorder. Data was obtained through retrospective analysis of medical records.
Results: Our service had 358 new referrals during the four-year period, and 237 patients were followed on average (median) by 14 months. Most of the patients were male (64.1%), single (84.8%), with a median age of 23.5 years (age ranged from 9 to 86 years). Schizophrenia was the main diagnosis (43.4%), followed by substance-induced (25.7%) and affective psychosis (18.6%). Taking follow-up diagnoses as gold-standard, initial diagnoses of bipolar disorder and schizophrenia spectrum disorders had the highest positive predictive values, 83% and 81% respectively. Most referrals to our programme were made by tertiary care (63.7%), followed by secondary (28.5%) and primary care (7.8%).
Conclusions: Here we presented a large sample of FEP patients in a representation as trustworthy to the reality of our programme as possible. Our analysis suggest that Early Intervention Programmes can be successfully implemented in LMICs.

Disclosure: No significant relationships.
Keywords: early intervention; PSYCHOTIC DISORDERS; latin america; First-episode psychosis

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Modeling of affective-negative content in the course of schizophrenia

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Introduction: The world literature presents ambiguous results regarding the conjugation of negative and depressive syndromes, due to an incomplete understanding of the main symptoms of depression in schizophrenia.
Objectives: To analyze the variants of the conjugation of depressive and negative symptoms at different stages of schizophrenia.
Methods: We used the data of our own observations (238 patients with a diagnosis of schizophrenia and no more than 5 years of experience of the disease) and compared them with the previously published results of studies. As a hypothesis, we analyze the variants of the conjugacy of affect and the negative domain within the framework of a single discrete field of schizophrenia.
Results: The analysis shows that with the apparent heterogeneity of the psychopathological structure, some depressive features, such as

apathy, anhedonia and social autism (characteristic of negative symptoms), tend to the abulia factor, whereas low mood, suicidal thoughts, pessimism, show affinity for the cluster of impoverishment of expression, that is, they represent an attenuated type of negative symptoms tending to the affective spectrum.

Conclusions: The conjugacy of depressive and negative disorders in schizophrenia, taking into account their phenomenological similarity, allows us to formulate a hypothesis about their existence within the framework of a single continuum model. The proposed continuum model can be used to understand the processes underlying pathogenesis and formulate the principles of personalized treatment and can be used as a starting point for research on the underlying biological processes and personalized treatment.

Disclosure: No significant relationships.
Keywords: Depression; negative symptoms; schizophrenia; abulia

EPP0593

Hospital readmissions in the group of users on the Flexible Assertive Community Treatment – experiences from RECOVER E Montenegro samples

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Introduction: As a part of Horizon 2020 program, RECOVER-E project activities were initiated in Montenegro in 2018. The initial step involved a thorough situation analysis of the setting and circumstances of treatment of users with severe mental health illnesses, followed by the establishment of the community mental health team (CMHT) within the Special Psychiatric Hospital Kotor. The CMHT became responsible for the treatment of a group of clients with severe mental health illnesses, based on the principles of „Flexible Assertive Community Treatment (FACT – A Dutch model).

Objectives: The main objective of this research was to establish whether there were substantial differences regarding the hospital readmissions in the group of patients treated by the CMHT, compared to usual mental health care in Montenegro.

Methods: Within the RECOVER-E project, a sample of 202 patients, users of mental health services, were recruited in Montenegro. Patients were randomized into two similar-sized groups - intervention group, whose treatment was managed by the multidisciplinary CMHT, and control group where treatment as usual was continued. To estimate and follow-up the frequency of hospital readmissions, medical documentation was used.

Results: Patients in the intervention group had less hospital days during the 18 months follow-up period. However, the differences between two groups regarding number of readmissions, and total length of hospital days were not statistically significant measured by independent T test.

Conclusions: This study showed that CMHT care could reduce the total length of hospital days during the treatment of psychotic disorders even dough during the COVID 19 pandemic and lock down measures

Disclosure: No significant relationships.
Keywords: Hospital readmissions; Community Mental Health Teams; Flexible Assertive Community Treatment; RECOVER E; Horizon 2020

EPP0594

Cognitive Impairment and the correlation with genetic Expression of GAD67, Gad65 and GABA beta2 Using Human Induced Pluripotent Stem Cells

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Introduction: Alteration of GABergic neurotransmission is accused to be sharing in the cognitive impairment in schizophrenia. Exploring the relation between the neuronal expression of GABergic genes and cognitive impairment in living patients through modeling of schizophrenia is an important step to know more about the core of the pathophysiology of this disorder

Objectives: Altered genetic expression of GAD 67 may have an important role in the pathophysiology of cognitive impairment in schizophrenia

Methods: . Reprogramming of human fibroblasts into human induced pluripotent stem cells (hIPSc) then neuronal differentiation was performed in 20 patients presenting with schizophrenia and 20 matched controls. Real time Polymerase chain reaction was done for measurement of genetic expression of GAD 65, GAD 67 and GABA beta 2. The Digit Symbol task, block design, block design task and similarities tasks from the Wechsler Adult Intelligence Scale., Trail A and Trail B making tests in addition to Rey-Osterrieth Complex Figure Test (ROCF) were applied to measure cognitive functions .

Results: There were lower means of GAD65, GAD67 and GABA beta2genetic expression in the patients group with significant statistical difference between the 2 groups. The down regulation of GAD 67 in patients presenting with schizophrenia is positively correlated with impairment in executive functions.

Conclusions: GAD 67 gene expression had the most significant correlations with the cognitive assessment in both patients and controls. The presence of those statistically significant correlations in both groups points to the possible role of GAD 67 gene functioning in the pathophysiology of cognitive impairment in schizophrenia

Disclosure: No significant relationships.
Keywords: GAD67; Genetic expression; schizophrénia