

EPV0906

Is treatment adherence linked to self-compassion in schizophrenia?

S. Laabidi, O. Abidi, A. Aissa*, R. Hosni, U. Ouali and R. Jomli

Psychiatry A, Razi hospital, MANOUBA, Tunisia

*Corresponding author.

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Introduction: Self-compassion is defined as the ability to be open to and touched by one's suffering and to relate to it with kindness and non-judgmental awareness. Although identifying factors related to treatment adherence remains an important challenge in patients with schizophrenia spectrum disorders, self-compassion has rarely been investigated in this population. Further studies are needed to investigate whether self-compassion training can improve treatment adherence in this population.

Objectives: The objective of the present study was to investigate the relationship between self-compassion and treatment adherence in patients with schizophrenia spectrum disorders.

Methods: thirty stabilized adult outpatients with schizophrenia (n=18), schizoaffective disorder (n=11), brief psychotic disorder (n=1) per DSM-5 criteria were included. Self-compassion was assessed using the 26-item Self-Compassion Scale (SCS). Treatment adherence was assessed using the Medical Adherence Rating Scale (MARS). Socio-demographic characteristics, including age, gender, academic level, and mean daily antipsychotic dosages were collected.

Results: There was no significant difference in SCS scores and MARS scores as a function of gender, age, or academic level. The results of the present preliminary study suggest a positive correlation between the SCS total scores and the MARS scores. It was found that higher levels of self-compassion are related with higher levels of treatment adherence in patients with schizophrenia spectrum disorders and lower levels of self-compassion are associated with discontinuation of medications without a psychiatrist's recommendation. This connection was present in all diagnostic groups.

Conclusions: The results of the present preliminary study suggest that self-compassion and treatment adherence are closely related. Improving self-compassion in patients with schizophrenia spectrum disorders may improve their level of treatment adherence. Further studies are needed to investigate whether self-compassion training programs could be useful as an extension of standard psychoeducation and cognitive behavioral therapy to improve treatment adherence in this population.

Disclosure of Interest: None Declared

EPV0907

Treatment adherence and insight in schizophrenia spectrum disorders

S. Laabidi, O. Abidi, A. Aissa*, R. Hosni, U. Ouali and R. Jomli

Psychiatry A, Razi hospital, MANOUBA, Tunisia

*Corresponding author.

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Introduction: Lack of adherence to antipsychotic medication in patients with schizophrenia spectrum disorders is a major risk factor for relapse and rehospitalizations which contributes to major social and economic consequences. A high proportion of patients with schizophrenia are partially or completely unaware of their mental disorder.

Objectives: The aim of this study was to investigate the association between insight and medication adherence.

Methods: A total number of 30 outpatients with schizophrenia spectrum disorders, according to (DSM-V) diagnostic criteria who were attending the department of psychiatry A Razi hospital between august and September 30, 2023 were included in this study. Patients' insight was measured by the birchwood insight scale. The degree of medication adherence was measured by using Medication Adherence Rating Scale (MARS).

Results: Patients enrolled in the study had a mean (SD) age of 43.2. There was no significant correlation between patients' insight and patients' ages, duration of illness and hospitalization times. In addition, there was no significant association between medication adherence and age, duration of illness, number of hospitalization or social level. Impaired insight was associated with poor antipsychotic medication adherence in patients with schizophrenia spectrum disorders. Higher insight was correlated to higher therapeutic adherence. Our results showed that the level of insight and compliance to treatment are positively correlated.

Conclusions: The results of this study support the hypothesis that insight and treatment adherence are closely related. Interventions to enhance insight may be helpful in improving medication adherence.

Disclosure of Interest: None Declared

EPV0908

Efficacy of acetylsalicylic acid in schizophrenia: a literature review

A. Aissa^{1,2*}, S. Jedda¹, F. Askri¹, O. Maatouk¹, U. Ouali¹, Y. Zgueb¹ and R. Jomli¹

¹Psychiatry A, Razi Hospital, Manouba and ²Psychiatry, Faculty of Medicine of Tunis, Tunisia, Tunisia

*Corresponding author.

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Introduction: There has been growing evidence to support the hypothesis that inflammation is involved in the pathogenesis of schizophrenia.

Objectives: The aim of the present literature review was to assess the efficacy of acetylsalicylic acid (ASA) as an adjuvant agent in the treatment of an acute exacerbation of schizophrenia.

Methods: We searched randomized clinical trials based on regular searches of MEDLINE, Embase, PubMed.

Results: We included four studies. The results were in favor of the efficacy of ASA in the study where authors targeted early psychosis. Illness duration seems to predict response to anti-inflammatory agents.

Conclusions: Further studies of early stages of schizophrenia are helpful.

Disclosure of Interest: None Declared