the 6-month, open-label Switch to Risperidone Microspheres (StoRMi) trial.

Methods: Treatment was initiated at RLAI 25 mg intramuscularly every 2 weeks, although higher (starting) doses were permitted if clinically necessary. Efficacy was evaluated using the Positive and Negative Syndrome Scale (PANSS), Clinical Global Impression (CGI) and Global assessment of functioning (GAF). Treatment-emergent adverse events (AEs) were monitored.

Results: A total of 1,849 patients were included. The mode dose was 25 mg for 52.9% of patients, the remainder evenly distributed among 37.5 and 50 mg doses. At baseline, patients treated with lower RLAI doses were more likely to be female, have shorter disease duration, milder symptoms, and be using less polypharmacy. The strongest predictors that a patient would remain on 25 mg RLAI were baseline PANSS hallucinatory behaviour item (OR = 0.78), baseline CGI (OR = 0.69), gender (OR = 1.56) and country (P< 0.001 for all). Efficacy measures improved for all dosage groups, with the greatest improvement in patients treated with lower doses. AEs were more frequent in patients treated with 50 mg RLAI (68% vs. 57% with lower doses, P<0.0001). Most AEs were mild to moderate in severity.

Conclusion: In this large, European sample, most patients were treated with 25 mg RLAI. Patients treated with lower doses tended to have milder baseline symptoms. Dosing patterns varied among different countries. RLAI was effective and well tolerated over the full range of allowed doses.

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Attitudes towards suicidal behaviours among health science students

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Background and aims: attitudes towards suicide among health science students will influence their future encounter with suicidal patients. The aim of the present study is to describe the attitudes towards suicidal behaviours among medical and nursing students from the University of Oviedo, and to identify the parameters (demographic, personal experiences and believes) that influence such attitudes.

Methods: medical (3° and 5° year) and nursing (1° y 2° year) students at the University of Oviedo who attended to class a regular day were asked to participate in the survey. Those who participated filled in the Attitudes Towards Suicide Questionnaire.

Results: a total of 162 students were included in this study. The mean age was 21 years (SD 2.4); 84% were women; 63% had religious believes; 15.6% had had at least once suicidal thoughts or ideas. An empathetic and optimistic view towards suicidal patients appeared to be mostly prevalent among health science students. Age, type of studies, previous information about suicide and history of previous suicidal thoughts influence some of these attitudes.

Conclusions: older, medical students and those who have received specific information about suicidal behaviours have attitudes more determined by a medical perspective. Previous history of suicidal ideation is associated with a more pessimistic view of these behaviours.

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Risperidone long acting injection: One year experience

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Introduction: Risperidone is the first atypical antipsychotic available in long acting injectable form. To gain clinical experience in our local services, Hollins Park Hospital, UK we designed this study to obtain information regarding its tolerability, efficacy and compliance

Method: Data was collected from 28 patients started on RLAI over a period of one year were: patients' age, sex, diagnosis, previous medication, reason for prescribing, dose started on, side effects and clinical outcome after 6 and 12 months. The clinical outcome was obtained from case note entries and rated as improved, same or deteriorated.

Results: Out of the 35 patients who were considered for RLAI, 28 were commenced, no data was available on 3 subjects. Hence 25 were followed up.

The mean age was 38.84 years, with majority male (72%) and with a diagnosis of Schizophrenia (72%), who received several antipsychotics (mean 4.2). The reasons for prescribing RLAI ranged from non-compliance to polypharmacy.

During the first 6 months they received between 25 to 50mg. Overall 52% of patients discontinued RLAI, the main reasons being patient's unwillingness to continue on RLAI.

At the end of 12 months 10(40%) patients maintained improvement and 2 patients had deteriorated, 3 patients stopped RLAI, 2 of them due to deterioration of mental state. The doses used were mostly 50mg. None of the 9 patients who stayed on RLAI received any further antipsychotic medication.

Conclusion: RLAI was well tolerated and efficacious in 36% (9/25) of our patient cohort over one year period, with no antipsychotic coprescription.

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Topographic and tomographic EEG changes after a single oral dose of antipsychotic drugs in healthy young subjects

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Several studies have documented QEEG changes induced by first generation antipsychotics. Few studies investigated QEEG modifications induced by second generation antipsychotics and reported inconsistent results. The present study is aimed to investigate, by means of high temporal resolution imaging techniques, changes in QEEG cortical current source density induced by haloperidol, risperidone and placebo in young healthy male subjects.

Each subject underwent three sessions, separated by at least a one-week interval. In each session, subjects received a single oral dose of placebo, or haloperidol (3 mg) or risperidone (1 mg). EEGs were recorded during a resting condition, before and 6 hours after drug administration.

With respect to placebo, a significant increase of delta and theta power was observed for both drugs; alpha1 increase was significant only for risperidone; in addition, beta1 power was increased by haloperidol and alpha2 power was decreased by risperidone. LORETA analysis revealed significant differences in cortical generators activity between placebo and haloperidol, involving frontal, cingulate and temporal regions for all EEG bands, except beta3. For risperidone, as compared with placebo, LORETA showed a significant increase of cortical current source density in frontal regions for delta, theta and alpha1.

The widespread increase of current source density for most EEG bands observed after haloperidol may suggest that this drug has