EW0091

Psychiatric co-morbidities in a French cohort of adults with high-functioning autism (HFA)

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Background and rationale Psychiatric co-morbidities are shown to be very prevalent in patients diagnosed with Autism Spectrum Disorder (ASD), up high to 53% for mood, 50% anxiety and 43% for ADHD disorders in an European cohort of adults with HFA. Using a new approach, our study proposes to explore aspects of co-morbidities in the largest French cohort of HFA adults (C0733/InfoR) by implying qualitative and quantitative clinical tools.
Aims To explore: (1) the prevalence rates of psychiatric co-morbidities; (2) the interplay between co-morbidities and the ASD symptoms.
Methods Diagnosis was made according to DSM 5 criteria. Dimensional evaluation used Social Responsiveness Scale (SRS), Systemizing Quotient (SQ) and Empathy Quotient (EQ). We used T-test, Mann–Whitney test and linear regression models.
Results We included 103 patients (mean age 29.3, sex ratio M/F: 3.4:1). Lifetime prevalence rates of 53.5% for depressive disorder 73.5% for anxiety disorders and 37.5% for ADHD were found. Subjects with psychotic co-morbid symptoms had a more severe social deficit (SRS score 66.2 vs 77.9 $P < 0.05$); patients with ADHD, lower cognition (mean IQ total 107.7 vs 99.0 $P < 0.05$). SQs ($P < 0.05$) were significantly higher in patients with co-morbid psychosis, dysthymia, suicide attempts, and depressive disorders and directly correlated with age ($\beta = 0.35$, $P < 0.05$). SQ and EQ were inversely correlated.
Discussion The results reproduce the high prevalence of co-morbidities in other studies and explore its association with social functioning and cognition. Identification of associated psychiatric conditions in subjects with HFA is therefore a crucial clinical issue potentially guiding the treatment.
Disclosure of interest The authors have not supplied their declaration of competing interest.

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EW0092

Group experience and dual pathology and addictions in a regional hospital in Spain

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Introduction Dual pathology is a term applied to those subjects suffering simultaneously from addiction and other mental disorder. Group psychotherapy can be used in people who have both diagnoses with good results in improvement of addiction and disease stabilization.
Objectives The purpose of this study is to analyse to efficacy of a group of psychotherapy for patients with alcohol addiction and other mental disorder, and analyse the presence of personality disorder in this group and how it affects its evolution.
Methods The study was conducted on a sample of 16 patients diagnosed with alcohol abuse or dependence with psychiatric co-morbidity who attended a therapy group for 6 months from January16 to June16. The study was conducted in ambulatory care (outpatient), being an open and heterogeneous group.
Results Main diagnosis was unspecified personality disorder and mood disorder (25%) followed by borderline personality disorder and mood disorder (18.75%), attention deficit disorder and hyperactivity (18.75%), mood disorder (12.5%), substance use disorder without other psychiatric co-morbidity (12.5%), narcissistic personality disorder (6.25%) and impulse control disorder (6.25%). Regarding progress in the stages of change, results were as follows: 31.5% of patients progressed to the stage of preparation for action, 25% alternating periods of abstinence from alcohol with brief relapse, 25% advanced to the stage of action, 18.5% managed to stay alcohol withdrawn.
Conclusions In our sample, we can conclude that a therapeutic group including patients at different stages of change and diagnoses is positive. At the end, improvement in mood and anxiety was observed.
Disclosure of interest The author has not supplied his/her declaration of competing interest.

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EW0093

The impact of cannabis in Schizophrenia: Pafip three-year longitudinal study on outcome and functionality after a first episode of psychosis

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Introduction The association between cannabis and psychosis makes crucial the intervention on cannabis use disorder at first episodes of psychosis (FEP), especially among young population. In this group of patients, the harmful potential of cannabis is more evident by its influence on neurodevelopment. However, the nature of the association cannabis-psychosis is not clearly described. It seems to represent a mediating factor for an increased risk of psychosis in healthy and high-risk populations, determining an earlier age of onset and worsening long term outcome.
Objectives To assess the impact of cannabis in terms of functional and clinical prognosis in patients recruited after a FEP.

Material and methods PAFIP is an early intervention program for early stages of psychosis. One hundred and sixty-three were included, followed-up at regular intervals of six months for three years with administration of clinical and functional scales (BPRS, SAPS, SANS, CDRS, GAF and Drake). Patients were divided into three groups: (1) those non-users neither before the onset nor during follow-up (nn) PEP, (2) consumers before the FEP and during follow-up (ss) and (3) consumers before the FEP that gave up consumption during follow-up (sn).

Results No statistically significant differences were observed in terms of functionality at three-year follow-up endpoint but a trend to a better-preserved functionality in the sn group. The sn group presented lower scores in scales for positive symptoms with respect to the comparison groups.

Conclusions The interruption in cannabis use may have a beneficial effect on short-term clinical prognosis and functionality on long term.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EW0094

Dual diagnosis and medical co-morbidity: Data from a specialized brief psychiatric in-patient unit

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Introduction Previous research on the prevalence of medical disorders among adults with dual diagnosis (DD) has been inconclusive.

Objectives The purpose of this study was to assess dual diagnosis and medical co-morbidity at the Brief Psychiatric Inpatient Unit of Marqués de Valdecilla Hospital, Santander in the period from January 2014 until March 2015.

Methods Ninety-three patients were admitted at our hospital from December 2014 until March 2015. The simple was analyzed retrospectively. Sixty-two of the patients (66.7%) met criteria for Dual Diagnosis. We collected socio-demographic variables, drug abuse, mental pathology, and treatment received.

Results The mean age of the sample was 42.95 years ($\pm$ 14 DS) with a male:female ratio of 1.8:1 (no significant differences by gender). Hypertension was more prevalent among patients without dual pathology (22.5%). Patients with dual diagnosis presented hypertension less likely (6.5%) ($P < 0.005$). This can be explained by the fact that patients without dual diagnosis had a higher mean age (47 years) than patients with dual diagnosis (42 years). We did not found statistically significant differences between both groups respect to diabetes mellitus, vascular brain disease, HIV and dyslipidemia.

Conclusions Hypertension was less likely to appear among patients with dual pathology admitted to an ultra brief psychiatry unit. This could be explained for an earlier mean age at admission among these patients.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EW0095

The association between autistic traits and post-traumatic stress disorder: Preliminary findings among typically-developing adults in Israel

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Background and aims Although studies show that those suffering from autism spectrum disorders (ASD) face an increased risk of exposure to trauma (bullying, physical abuse), the co-morbidity between autistic symptoms/traits and post-traumatic stress disorder (PTSD) was almost entirely neglected by researchers. The aim of this preliminary study is to explore the possible associations between these two conditions among typically-developing college students.

Methods Participants were 39 students, recruited from 2 Israeli universities. Twenty-four participants were psychology students, and 15 were business administration students. Participants completed self-report questionnaires tapping sociodemographic background, trauma exposure, PTSD (the PTSD Checklist-5, PCL-5), and autistic traits (the Autism Spectrum Quotient, AQ).

Results Our preliminary findings revealed a positive association between symptoms of PTSD and autistic traits. More specifically, among those in the 3rd and 4th highest quartiles of AQ scores, 87.5% met the cut-off score for a probable PTSD diagnosis (χ^2 (3) = 8.25, $P < 0.05$). In addition, t-tests comparing the PTSD and non-PTSD groups showed significant differences in 3 out of 5 AQ sub-scales: social skill ($t(37) = -2.12$; $P < 0.05$), attention switching ($t(37) = -2.09$; $P < 0.05$) and communication ($t(37) = -2.80$; $P < 0.01$). Thus, higher AQ scores were reported by those in the PTSD group.

Conclusions ASD may serve as a significant risk factor for post-traumatic symptomatology. The associations between these two conditions may be mediated by a variety of potential shared vulnerabilities, including increased rumination, dysregulated emotion and impaired social cognition. Further research is needed in order to explore these mechanisms, as well as to assess co-morbidity in clinical samples of both ASD and PTSD.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EW0096

Diet and physical activity intervention effectiveness in acute mental patients, during hospitalization: A matched case-control study

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Introduction Diet and physical activity interventions are effective in psychiatric outpatients that suffer from obesity, namely those treated with antipsychotic drugs. However, there is less evidence related to these interventions in hospitalised acute patients.

Aim To evaluate the effect of a diet and physical activity program on weight and BMI variation in acute psychiatric patients during hospitalisation.

Methods Matched case-control study from January to September 2016. Inclusion criteria: patients with at least 15 days of hospitali-