batteries and useful tools for research in several scientific domains, including psychiatry, psychology, genetics and neurosciences.
Aims To validate and disseminate the Portuguese PennCNP battery for clinical and non-clinical studies.
Objectives To translate and provide preliminary psychometric data of the Portuguese PennCNP tests in 9 neurocognitive domains.
Method The PennCNB (Gur et al., 2010) was translated and administered to a sample of 120 Portuguese participants from the general population.
Results Findings on the internal consistency and performance (speed and accuracy) are presented for the 19 tasks included in the PennCNB, in addition to results of correlation analysis within tests on the same domain for criterion validity, and gender sensitivity analysis.
Conclusion Computerized assessment provides efficient and reliable results, based on performance of abstract.
Objective and simple tasks that cover a vast range of cognitive functions The administration requires minimal training and provides a quick and automated scoring procedure, with great utility in several research and clinical fields. The availability of a test battery suitable for a large number of Portuguese native-speakers worldwide is of added value, since the translation of measures to several languages allows creating more extensive normative samples and direct results comparability in future research, including transnational or cross-cultural studies and clinical trials.
Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV1199

"Neurodevelopment in a dish" Elucidates the mechanisms of autism spectrum disorder

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Introduction Autism spectrum disorders (ASD) is a group of neurodevelopmental disorders characterized by deficits in social cognition, communication, and behavioral flexibility. Most of the cases appear to be caused by the combination of autism risk genes and environmental factors affecting early embryonal brain development. The current animal and 2D cellular models are not able to recapitulate the complex integrity of the developing brain. Therefore a model of the brain that can cast a light on the pathological processes during brain development is of a high need.
Aim and objectives The aim of our research is to develop a three-dimensional brain organotypic system (brain organoids) for culturing patient's derived induced pluripotent stem cells (iPSC).
Methodology We propose a multidisciplinary approach, involving the generation of patient specific iPSC from somatic cells (fibroblasts) and 3D culturing techniques to build a complex "humanized" in vitro platform for ASD research. Further we will investigate differences in gene expression of potential disease related markers and cellular phenotype between autistic patients and controls.
Results Brain organoids have the ability to recreate the right complexity of the brain. On the cellular and gene expression level, organoids demonstrate a high similarity to the neurodevelopment in vivo and can therefore recapitulate early stages of the neurogenesis.
Conclusion To date organoids are the most relevant cellular in vitro platform for the understanding the mechanisms behind ADS pathology. Organoids are a good modeling system for elucidating the role of epigenetic and environmental factors for development of ASD.
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EV1200

Pictorial representation of illness and self-measure as an instrument for diagnostic of illness representation in youth with ultra-high risk for psychosis

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Introduction Pictorial representation of illness and self-measure (PRISM) was developed as screening tool assessing implicit reaction to somatic illnesses. Conclusion is based on comparisons of the positions of illness-related ("Illness" and major symptoms) and unrelated ("Me", "Family", "Work/study") objects on the list.
Objectives Due to its easiness and implicitness PRISM could be promising addition to illness representation questionnaires in mental illnesses.
Aim was to reveal validity of the PRISM in youth with ultra-high risk for psychosis.
Methods Eighty-one male patients 16–25 years old meeting criteria of ultra-high risk for psychosis; preliminary diagnoses of mood disorders 34, personality disorders 26, schizotypal disorder 21 patients) filled PRISM, beck cognitive insight scale, symptom checklist 90-r, illness perception questionnaire, quality of life and enjoyment questionnaire and happiness scale.
Results According to hierarchical regression, conditional "Self-Illness" distance (after control for mean distances on the list) was related to less psychopathological complaints, lower subjective illness severity and emotional representations, higher treatment control and better quality of life. "Self-symptoms" distance was related to better cognitive insight, lower emotional representations and consequences and moderated the relationship between "Self-Illness" distance and appraisals of illness length and dynamic.
Conclusions Conditional "Self-Illness" distance in PRISM could reflect cognitive appraisal of illness based on symptoms and related to life satisfaction while "Self-Symptoms" distance reflects merely emotional reaction based on cognitive insight.
Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV1201

Towards a new structure of the interpersonal reactivity index. reliability and validation of the Portuguese version: A comparative analysis

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Objective Empathy has received a lot of attention with the creation of an Interpersonal Reactivity Index (IRI). IRI is assessed using a 28-item questionnaire with four 7-item scales:
– perspective-taking (PT) scale;
– fantasy (FS) scale;

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– empathic concern (EC) scale and iv) personal distress (PD) scale. Such questionnaires have been translated in many languages (see Table 1). This work aims to compare the original model with existing modified, hierarchical, shortened models in the literature and to also translate and validate the IRI for Portuguese.
Methods A convenience sampling was used ($n = 130$) to conduct confirmatory factor analysis (CFA) using AMOS software. The original four-factor model is contrasted with modified, hierarchical and shortened models proposed in the literature, reporting internal consistency statistics and their fit indices.
Results The same structure of factors was found in the sample with reasonably good fit indices $\chi 2/df = 1.57$, CFI = 0.77, AGFI = 0.72 and RMSEA = 0.067. Internal reliability for each scale of the IRI was not excellent (< 0.90), but it is in line with the literature: PT with a Cronbach's alpha of 0.74, FS with 0.79, EC with 0.74 and PD with 0.65. The comparison with other modified versions of the IRI latent factor structure revealed that two models with better fit than the original version, and the potential for a shortened Portuguese version of the IRI.
Conclusion IRI is a valid instrument to measure empathy in the Portuguese Population and is in line with previous findings. Some modifications to the original latent structure provide a better data fit than the original one.

Table 1 Validation studies of the 4-factor model structure of the IRI.

Country	Language	(n)	Reliability measures (Cronbach's alphas)				Fit indices			
			PT	FS	EC	PD	χ^2/df	CFI	AGFI	RMSEA
Sweden	Swedish	221	-	-	-	-	2.04	-	-	0.069
		137	-	-	-	-	1.79	-	-	0.076
Spain	Spanish	1997	0.75/0.74	0.77/0.80	0.71/0.67	0.69/0.71	9.29	-	0.88	-
		692	0.70/0.64	0.71/0.71	0.67/0.63	0.70/0.64	6.38	-	0.80	-
		515	0.73/0.75	0.76/0.75	0.68/0.70	0.70/0.72	2.48	-	0.87	-
China	Chinese (Cantonese)	580	-	-	-	-	6.54	0.65	0.85	0.06
Netherlands	Dutch	651	0.73	0.83	0.73	0.77	2.93	0.86	0.87	0.06
Spain	Spanish	360	0.71	0.78	0.68	0.77	14.38	-	0.67	0.136
Chile	Spanish	435	0.73	0.76	0.73	0.70	2.27	0.81	-	0.054
Japan	Japanese	95	0.66	0.73	0.70	0.60	2.40	-	0.96	-
France	French	322	0.71	0.81	0.70	0.78	2.29	0.81	-	0.065
Portugal	Portuguese	130	0.74	0.79	0.74	0.65	1.57	0.77	0.72	0.067

Disclosure of interest The author has not supplied his/her declaration of competing interest.

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EV1202

Development of a new activity measure: Activity perception in healthy population and in people with chronic illness

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Introduction Self-reports provide rich information about the types of activities people engage in. Reviewing current activity measures two issues become evident. Firstly, they were developed and validated in healthy populations. Secondly, they are diverse in their applications and measured domains. Thus, to assess the construct of activity fully large numbers of measures need to be used.
Objectives The study aimed to explore different dimensions of activity (e.g. work, physical, mental, leisure, sedentary behaviours) using a new scale assessing multiple domains of daily activities.
Methods A new activity scale was used to investigate the types of activity and inactivity in people with chronic illness (asthma, chronic fatigue syndrome (CFS)) and in a healthy group. The types of activities measured included; leisure and sport, home and outside, social activity, work and education, and mental activity. The scale also aimed to measure the construct of inactivity, represented by sedentary behaviours, such as staying in bed during the day.
Results The results showed a pattern of significant correlations between the new activity scale, specifically its two major domains of activity and inactivity, and other measures of functioning and activity in the illness groups, but not in the healthy group.
Conclusions The lack of significant associations between the new activity scale and other measures of activity and functioning within the healthy group indicated the measure may be more suitable for assessing activity in people with chronic illness than in healthy people. Additionally, the results underscore the importance of measuring inactivity as a separate domain.
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EV1203

Outcomes assessment: Reliable change index (RCI) in assessing health outcomes in clinical practice

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Introduction The assessment of therapeutic outcomes and the evaluation of treatment efficiency and effectiveness is an area of interest for clinicians and researchers. Scientific evidence demands randomized controlled trials and inter-groups comparisons with a minimum number of participants in each treatment modality, a requirement rarely feasible in clinical practice where the assessment of treatment outcomes, with regards to therapeutic goals, is crucial both in terms of statistical significance and clinical relevance.
Objective The aim of this poster is to present an alternative methodology which permits to evaluate the individual's change.
Method The reliable change index methodology allows for the estimation of statistical significance (statistically reliable change) and clinical relevance (calculation of cutoff points and its interpretation criteria). Two examples are presented: a group of patients with asthma in treatment and a female with major depression who underwent electroconvulsive therapy (ECT).
Results/discussion Both cases were analyzed using standardized statistical analyses and the RCI method in order to estimate clinical change. The results illustrated the adequacy of both procedures for decision making in terms of effectiveness. However the RCI offered greater specificity with regards to individual changes. More specifically, RCI provided a more concrete estimation of the proportion of cases of asthma that showed change after the intervention, and also, indicated if such change were not only statistically significant, but also clinically relevant. Besides, when a single case was assessed (ex: ECT case) this methodology proved useful to estimate the efficacy of a continuation and maintenance program.
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