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Morphophenotypical patterns in patients with negative symptoms in schizophrenia

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Introduction Positive-negative dichotomy in course of schizophrenia leads to search for factors which could influence the formation of basic symptoms. The study of patients' body types and morphological peculiarities according clinical feature of schizophrenia could find some influence factors. Body type and regional morphologic dysplasias (RMD) are basically morphophenotypical patterns available for routine examination in usual clinical psychiatric practice.

Aims To reveal associations between body type, morphologic dysplasias and course of schizophrenia.

Methods Anthropometric, somatoscopy examination of patients with schizophrenia with gradually progressive negative disorders: emotional, volition, thought disturbances, increasing autism and social isolation, stable anhedonia with motivation defect were conducted. The accounted morbidity of 168 patients from the whole group of individuals with schizophrenia was about 10% (128 [76%] males, 40 [23.8%] females). Clinical presentations of schizophrenia met the criteria of ICD-10. Anthropometric investigation was conducted with the help of Martin's anthropometer and major thickness compasses for recognition of body type. RMD was registered descriptively.

Results It was shown that in patients with negative course of schizophrenia asthenic body type prevailed (60%) with the accumulation of RMD (94.4%) in comparison with healthy individuals (26.2%, $P < 0.001$). Among patients with positive symptoms of schizophrenia picnic body type prevailed ($P < 0.001$).

Conclusions Asthenic body type, accumulation of multiple RMD is associated with the domination of negative symptoms and continuous course of schizophrenia. Results of the study indicate the need for a deeper study of this issue on constitutional approach.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1592>

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Comparison of cortisol levels in patients with schizophrenia and in healthy controls

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Introduction The hypothalamus-pituitary-adrenal axis (HPAA) plays a pivotal role in response to a range of external and internal factors often described as "stress". Growing evidence in a literature, suggest various dysregulations of HPAA, in course of numerous mental disorders. Patients with schizophrenia and bipolar disorder seem to have elevated basal cortisol secretion,

what might be caused by the diminution of glucocorticoid receptors' amount. It was of the interest if the cortisol concentration in patients, with diagnosed schizophrenia, differs from healthy individuals.

Materials and methods Two groups of participants were included into the study. First group (study) consisted of 10 patients with diagnosed schizophrenia and control group which included 38 healthy individuals. Study was divided into two stages, first one (pilot) included only control group, and utilized cortisol concentrations measurement from saliva, blood and 24 h urine sample. Second part (main study) involved both groups although focused on a salivary cortisol concentrations.

Results A mean salivary cortisol concentration in patients with schizophrenia who underwent treatment was significantly lower in comparison with healthy individuals.

Conclusions Obtained results indicate that patients who underwent a treatment, and does not present notable clinical signs of schizophrenia, may have moderately lowered levels of salivary cortisol. This may be a reflection of relenting psychotic symptoms as well as a direct effect of atypical antipsychotic drugs on a HPA axis activity.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1593>

EV1264

Association between GRM3 gene polymorphisms and response to treatment in Moroccan schizophrenic patients

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Objective The aim of this study is to evaluate the association between response to treatment in Moroccan schizophrenic patients and GRM3 gene polymorphisms.

Method We have genotyped three SNPs of GRM3 gene (rs1989796, rs1468412, rs1476455) in 33 Moroccan schizophrenic patients. We assessed the severity of symptoms using Positive and Negative Symptoms Scale (PANSS) and Brief Psychiatric Rating Scale (BPRS) during two months of antipsychotics treatment.

Results The result revealed a positive change in PANSS negative symptoms in patients with rs1468412SNP and a difference in allele frequency of rs1989796SNP between responders and nonresponders to treatment.

Conclusion Our data indicate that rs1468412 and rs1989796 GRM3 gene polymorphisms play a role in response to schizophrenia treatment.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1594>