

**Objectives** Heterogeneity on basis of the important sign jeopardizes the signal detection.

**Aims** Assessment of interaction between clinical symptoms and CD in schizophrenic patients in remission with and without residual psychotic symptoms (RPS).

**Methods** Adult schizophrenic patients in remission with and without RPS (DSM 295.30) on stable treatment not less than 6 months were assessed with PANSS, CGI, BACS. The indices of the testing were compared between groups. The correlation analysis was performed. The correlation was considered significant if  $R > 0.60$ .

**Results** Ten females and 34 males were divided into two groups according to presence (27 patients) or absence (17 patients) of RPS (PANSS items P1 and P3  $> 2$  but  $< 5$ ). The severity of symptoms and CD were equal in both groups, excluding P6 ( $P = 0.0005$ ), P20 ( $P = 0.007$ ), P23 ( $P = 0.0004$ ), and positive subscale PANSS ( $P = 0.00001$ ). In the group without RPS, we found that CGI score, scores of 10 items of PANSS, scores of PANSS subscales, excluding negative subscale, and total PANSS score highly negatively correlated with total BACS score (average  $R = -0.70 \pm 10$ ). In the group of patients with RPS, no correlations were found.

**Conclusions** Patients with RPS has clinical significant dissociation of psychic and cognitive functioning that should be considered in planning, and assessing of results of cognitive enhancers studies.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.02.121>

#### EW0508

### The peculiarity of experiencing body by patients in schizophrenia

G. Rupchev<sup>1,\*</sup>, A. Alekseev<sup>1</sup>, A. Tkhostov<sup>2</sup>, A. Spivakovskaya<sup>3</sup>, V. Guldan<sup>3</sup>

<sup>1</sup> Federal State Budgetary Scientific Institution "Mental Health Research Center", Laboratory of Psychopharmacology, Moscow, Russia

<sup>2</sup> Lomonosov Moscow State University, Faculty of Psychology, Clinical Psychology Department, Moscow, Russia

<sup>3</sup> Lovonosov Moscow State University, Department of clinical psychology, Moscow, Russia

\* Corresponding author.

**Introduction** By the present, the study of corporeality as a psychological phenomenon in schizophrenia has had a lack of attention. At the focus of works, there have been mainly psychopathological phenomena: cenestopathies, visceral hallucinations and body scheme disturbances. There is an evidence of the necessity for psychological investigations: the execution of radical changes in appearance, a frequent turning to plastic surgery, dysfunctional wearing and transsexuality.

**Objectives** The experimental group consisted of 23 patients in schizophrenia of paranoid type (F 20.00). The control group consisted of 27 healthy subjects.

**Aim** It is to study the peculiarity of experiencing their own body by patients in schizophrenia.

**Methods** There are projective techniques, such as: "A Picture of Me", "Verbal Self-Portrait", "A Picture of Inner Body" and the psychosemantic test "Classification of Sensations".

**Results** There are statistically significant differences ( $P < 0.005$ ) found between the groups:

- patients with schizophrenia are characterized for their deficit of experiencing their body. It does not refer to "Myself" and is deindividualized. The body does not serve as a physical presentation of the subject in a social world;
- a wary attitude is observed in relation to body displays in the form of inner body sensations with a minor (than in norm) awareness relatively to the inner arrangement of their own body. This causes

the increase of the quantity of intraceptive sensations categorized by patients in schizophrenia as unhealthy or a threat.

**Conclusion** The above-mentioned peculiar features of corporeality in schizophrenia make it a source of negative experiences.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.02.122>

#### EW0509

### Effectiveness of paliperidone palmitate long-acting injectable in the initial stages of psychosis: Clinical and functional impact

L. Sánchez Blanco<sup>1,\*</sup>, M. Gómez Revuelta<sup>2</sup>, V. Gajardo Galán<sup>1</sup>, M. Juncal Ruíz<sup>1</sup>, R. Landera Rodríguez<sup>1</sup>,

G. Pardo de Santayana Jenaro<sup>1</sup>, O. Porta Olivares<sup>1</sup>, N.I. Núñez Morales<sup>2</sup>

<sup>1</sup> Hospital Universitario Marqués de Valdecilla, Psychiatry, Santander, Spain

<sup>2</sup> Hospital Universitario de Álava-sede Santiago, Psychiatry, Vitoria-Gasteiz, Spain

\* Corresponding author.

**Introduction** An appropriate early intervention (EI) after the onset of a first episode of psychosis (FEP) is a key factor to prevent relapse, cognitive and functional impairment related to neurotoxicity as it is a critical period in order to get good adherence to treatment. This is the most reported factor linked to relapse. Therefore, interventions focused on getting good adherence to treatment may make the difference in terms of outcome.

**Aims** To compare relapse rates, symptom severity and level of functionality before and after treatment with Paliperidone Palmitate Long-Acting Injectable (PP-LAI). To analyze prior antipsychotic treatments and side effects registered before and after the introduction of (PP-LAI).

**Material and method** This is a cross-sectional descriptive study. We analyzed a sample of 15 patients, recruited from PAFIP (an specialized EI unit) and treated with variable doses of PP-LAI. They all met diagnostic criteria for schizophrenia according to DSM-IV. Clinical and functional data of the two years before and after treatment introduction were recorded.

**Results** Twenty-seven percent of the patients resumed their work activity or studies and 33% of the patients increased their social activity. Thirteen percent of the patients improved from negative symptoms. Prior to treatment introduction, more than a half of the sample, had suffered one or two relapses. After treatment introduction, 87% did not experience more relapses while 13% experienced another relapse.

**Conclusions** Treatment with PP-LAI is associated to a recovery of functional abilities, and a trend to clinical stability with high adherence to treatment related to few side effects.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.02.123>

#### EW0510

### Adjunctive memantine in clozapine-treated refractory schizophrenia: An open-label one-year extension study

P. Schulte<sup>1,\*</sup>, S. Veerman<sup>2</sup>, J.B. Deijen<sup>3</sup>, L. De Haan<sup>4</sup>

<sup>1</sup> Mental Health Service North-Holland-North, Department for Specialized Treatments, Treatment Center for Bipolar Disorder, Alkmaar, Netherlands

<sup>2</sup> Mental Health Service North-Holland-North, Community Mental Health Division, Alkmaar, Netherlands