

Psychosis, etc.); nevertheless, in the current date, ATPD encompasses a broad spectrum of heterogeneous clinical presentations with low diagnostic stability over time.

Objectives: To describe a case of ATPD, highlighting the variability of its psychopathological phenomena and establishing a comparison with historical descriptions of this nosological entity.

Methods: Clinical case report and brief review of literature.

Results: V, 20-year old male without psychiatric history, presents in the emergency room exhibiting fluctuant psychopathology over the preceding two weeks – initially with depressive mood, anhedonia, apathy, bizarre behaviors and soliloquies; afterwards, showing paranoid delusional ideation; total insomnia in the previous 2–3 days; finally, showing grandiose delusional ideation; and throughout the episode, revealing pseudohallucinatory verbal activity assuming multiple identities. Several stress factors were identified in close time-relation with the onset of these symptoms. V. started risperidone 2mg 2id and quetiapine 100mg id and was discharged 2 weeks later, fully recovering from these psychopathological phenomena. V. remains asymptomatic at 6 months of follow-up.

Conclusions: Historically, some classifications of this disorder focus on etiological factors, others on clinical evolution and course, and yet another group on separation from the Kraepelinian duality (schizophrenia and bipolar disorder). ATPD is a diagnosis with high clinical heterogeneity and low stability over time, which can have implications in follow-up and long-term outcome.

Keywords: Acute Transient Psychotic Disorder; Bouffée Delirante; historical review; Cycloid psychosis

EPP1182

Reality–fantasy collapse in schizophrenia vs. neurocognitive impairment during Rorschach's III card responding

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Introduction: Adaptive thinking demands a balance between manifestations of intrapsychic activity and reliance on requirements of the outer reality. Features of responses to Rorschach's III card could provide information about subject's ability to preserve the dialectical tension between the two poles of external and internal realities during solving tasks related to interpersonal relationships.

Objectives: To compare reality-fantasy relations during Rorschach's III card responding in patients with schizophrenia, neurocognitive impairment and normal subjects.

Methods: Participants were 12 young adult inpatients with schizophrenia, 14 students without mental disorders and 12 inpatients with neurodegenerative diseases of old age. Reality-Fantasy Scale (RFS) was applied to assess responses to Rorschach's III card. RFS scale ranges from –5 (reality collapse into fantasy) to 5 (fantasy collapse into reality) (Tibon-Czopp et al., 2015).

Results: Patients with schizophrenia ($M = -3.38$, $SD = 1.9$) demonstrated tendency to fantasy domination (and reality collapse) if compared with the students ($M = -1.47$, $SD = 2.0$, $p < 0.05$). Patients with neurodegenerative diseases ($M = 0.75$, $SD = 2.1$), conversely, had difficulties to apply fantasy during solving Rorschach task ($p < 0.01$).

Conclusions: Express Rorschach testing using III card could be useful to provide screening data of thinking tendencies related to situations of social interaction. Also it provides a mental pabulum regarding role of cognitive impairment in schizophrenia in relation to significance of affective dependence of their thinking process.

Conflict of interest: The reported study was funded by RFBR, project number 20-013-00772

Keywords: Reality-Fantasy Scale; Rorschach; schizophrenia; Neurodegenerative diseases

EPP1183

Storytelling in schizophrenia: Neuropsychological basis of pragmatic language dysfunction (preliminary study)

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Introduction: Storytelling could be considered as one of the ecological way to study the pragmatic function of speech in schizophrenia. It demands the ability to create narrative (text) that would be appropriate to particular context. Neuropsychological basis of text-context relation impairment in schizophrenia needs clarification.

Objectives: To study neuropsychological correlates of pragmatic text-context impairment revealed during storytelling in patients with schizophrenia.

Methods: Participants were 14 inpatients with schizophrenia and 18 students without mental disorders. Neuropsychological functioning was measured in both groups according to Luria's method. Pragmatics assessed by storytelling on images which simultaneously depicts some narrative that should be correctly decoded and after expressed to investigator. The images were taken from Luria's neuropsychological album and Bidstrup's drawings.

Results: Stories of patients with schizophrenia were different from control stories in two ways. Some patients produced stories which predominantly characterized by incompleteness that don't give an opportunity to understand their narratives as connected whole because of its lacunarity. In other cases, stories predominantly characterized by distortion of the storyline which became not realistic and don't match with the original picture. Incompleteness errors primarily correlates with neuropsychological dysfunction of left frontal lobe ($p < 0.001$). Distortion errors also mainly correlates with dysfunction of frontal lobes ($p < 0.01$), but qualitative analysis reveals right hemisphere involvement.

Conclusions: Impairment of the pragmatic function of speech during storytelling in schizophrenia could manifest itself in at least two different ways. Preliminary results show that it could be connected with different neuropsychological mechanisms and worth considered with left-right frontal lobes opposition.

Conflict of interest: The reported study was funded by RFBR, project number 20-013-00772

Keywords: Pragmatic function of speech; schizophrenia; neuropsychology; Storytelling

EPP1184

Working memory and abstract thinking in patients with schizophrenic spectrum disorders

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Introduction: According to a selective meta-analytical review, weakness of working memory is considered as one of the fundamental disorders in schizophrenia. Some researchers propose identifying this disorder as an endophenotypic marker of schizophrenia diathesis. Many researchers also emphasize violations of “abstract thinking”, that is, the ability of patients to operate with abstract concepts. Many scientists understand the violation of “abstract thinking” as the difficulty of patient in operating with the dominant signs of the concept. Based on these approaches, we assume a dark relationship between working memory and abstract thinking.

Objectives: The aim of this study is to investigate the relationship between working memory and abstract thinking defect in patients with schizophrenic spectrum disorders.

Methods: 16 patients with schizophrenic spectrum disorders were studied. To study abstract thinking, the following neuropsychological and psychometric techniques were used: exclusion of objects, D-KEFS understanding of proverbs (latent concepts were recorded). The following techniques were used to study working memory: n-back; Wechsler Test, subtest Digit Repetition.

Results: As a result of preliminary research, the following data was obtained. We found significant differences between the number of irrelevant features (which corresponds to impaired abstract thinking) and the severity of impaired working memory ($p = 0.035$). The more the memory was impaired, the more the subjects demonstrated the impairment of abstract thinking.

Conclusions: Thus, our results justify our assumption. A relationship between working memory and abstract thinking is founded to be possible. Further studies of this issue requires a wider techniques battery as well as a larger sample.

Conflict of interest: The reported study was funded by RFBR, project number 20-013-00772

Keywords: schizophrenia; neuropsychology; Working memory; Abstract thinking

EPP1185

Impairment of motivation in patients with schizophrenia and the development of a program for their psychosocial treatment

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Introduction: Reduced motivation in schizophrenia is expressed in as the reduction of activity and social functioning.

Objectives: Assessment of motivation in patients with schizophrenia and development to their psychosocial treatment.

Methods: Clinical, psychometric (URICA, PSP, PANSS), statistical. Included 100 patients diagnosed with schizophrenia F.20-29 (ICD-10) with various levels of deficit.

Results: The analysis showed the connection between the intensity of negative disorders of the patients with the level of their motivations: in the group of patients with severe deficiency (pseudorganic), a decrease in the level of motivation was found: the score of the «Pre-contemplation» stage of the URICA scale (56.20 ± 9.29) was higher ($P < 0.001$). Patients with moderate deficit (diminished schizoid) changes were distinguished by high motivation, high scores on the «Action» (49.34 ± 8.22 , $P < 0.005$) and «Maintenance» scale (52.43 ± 10.51 , $P < 0.005$). A negative correlation was established between the indicators of patient motivation and the PANSS scale: will disorders ($r = -0.75$, $P < 0.01$), social withdrawal ($r = -0.64$, $P < 0.01$), blunted affect ($r = -0.62$, $P < 0.005$), etc. High positive correlation found between motivation rating and PSP scores in socially activity ($r = 0.74$, $P < 0.005$) and social relationships ($r = 0.65$, $P < 0.01$). We have developed a comprehensive program of psychosocial treatment, including compliance therapy, motivational, cognitive and social skills training, destigmatization actions and an assessment of its effectiveness.

Conclusions: The developed rehabilitation program showed high efficiency: increasing motivation, reducing self-stigmatization, developing communication skills, improving social functioning and cognitive sphere in patients with schizophrenia.

Keywords: motivation; schizophrenia; psychosocial; Treatment

EPP1186

Different alternations of static and dynamic brain regional topological metrics in schizophrenia and obsessive-compulsive disorder

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Introduction: Though schizophrenia (SZ) and obsessive-compulsive disorder (OCD) are conceptualized as distinct clinical entities, they do have notable symptom overlap and a tight