Methods A total of 167 HC participated in the MRI study and filled the Schizotypal Personality Questionnaire (SPQ). We pre-processed MRI data with SPM8 and DARTEL. Then, we used thalamic grey matter volumes (GMV) as features in the random forests prediction of disease status at the single subject level. Finally, we tested SPQ scores differences between FP and TN with Mann-Whitney test.

Results The classification accuracy was 71%. FP had greater SPQ scores compared to TN (P=0.007).

Conclusions Classification accuracy of our classifier in an independent sample suggests that thalamic GMV patterns are reproducible markers of disease status. Furthermore, the present results also suggest that variability of thalamic GMV patterns in HC may have relevance for subclinical phenotypes related to schizophrenia spectrum.

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

Reference

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http://dx.doi.org/10.1016/j.eurpsy.2017.01.323

0102

The impact of relapses in acute schizophrenia's clinical outcome: A descriptive cross-sectional analysis

I. Carreira Figueiredo ¹, *, D. Pereira ¹, I. Cargaleiro ¹, P. Aguiar ² ¹ Centro Hospitalar Psiquiátrico de Lisboa, Psychiatry, Lisboa,

Portugal

² Escola Nacional de Saúde Pública, Statistics and Statistical Methods in Clinical Epidemiology, Lisboa, Portugal

* Corresponding author.

Introduction Recent studies suggest that most of schizophrenia's first-episode patients have the potential for long-term remission. Conversely, some meta-analysis estimate the actual median recovery rate to be 13.5% [1]. Relapses may contribute to the emergence of increased morbidity and treatment resistance.

Objectives To evaluate possible relationships between the numbers of previous admissions, years of diagnosed disease and hospitalization length.

Methods A cross-sectional retrospective study on all patients (n = 202, 150 men and 52 women) admitted at an acute inpatient unit throughout the year of 2015, diagnosed with schizophrenia (ICD-9, 295). Collection of socio-demographic data, number of previous admissions (PA), years of diagnosed disease (YDD) and hospitalization length (HL). Descriptive statistical analysis, Spearman rank correlation and Mann-Whitney U test.

Results Overall, the sample's mean age was 44.3 years old (std 12.7), being lower in men (42.5 versus 49.7). The average of admissions was 1.2 per year. PA and YDD were significantly associated (P < 0.0001). Contrarily, there was no statistical association between the number of PA and HL (P > 0.1), as well as between YDD and HL (P > 0.1) was found.

Conclusion This study provides additional evidence for schizophrenia's early onset in men. There seems to be no association between relapses and treatment resistance, considering PA, YDD and HL as valuable soft outcomes. Future understanding of

relapses' pathophysiological mechanisms is warranted in order to explain schizophrenia's low median recovery rate.

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

Reference

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http://dx.doi.org/10.1016/j.eurpsy.2017.01.324

0103

Functioning in schizophrenia: Similarities and differences between clinical, patient and expert perspectives

M. Barrios^{1,*}, G. Guilera¹, O. Pino², E. Rojo³, S. Wright¹,

J. Gómez-Benito¹

¹ University of Barcelona, Social Psychology and Quantitative Psychology, Barcelona, Spain

² Hospital Benito Menni CASM. Sisters Hospitallers, University of Barcelona, Social Psychology and Quantitative Psychology, Barcelona, Spain

³ Hospital Benito Menni CASM–Sisters Hospitallers, Department of Psychiatry–International University of Catalonia, Barcelona, Spain * Corresponding author.

Introduction In 2001, the World Health Organization (WHO) created the International Classification of Functioning, Disability and Health (ICF) to offer a comprehensive and universally accepted framework to describe functioning, disability and health. The ICF Core Sets (ICF-CS) are a selection of categories that serve as a minimal standard for the assessment of functioning and disability in a specific health condition. The ICF-CS for schizophrenia was created in 2015 based on four preliminary studies that intend to capture different perspectives.

Objectives The aim of this study is to describe the similarities (i.e. overlap) and discrepancies (i.e. unique contribution) between the clinical, patient and expert perspectives on the most relevant problems in functioning of individuals with schizophrenia, being focused on the European WHO region.

Methods Forty-four experts from 14 European countries participated in an expert survey, patients with schizophrenia were involved in four focus groups, and health professionals assessed 127 patients in relation to daily life functioning. Information gathered from these three preliminary studies was linked to the ICF.

Results Data showed that although a considerable number of second-level ICF categories agreed on the three preparatory studies (n = 54, 27.7%), each perspective provided a unique set of ICF categories. Specifically, experts reported 65 unique ICF categories, patients 23 and health professionals 11.

Conclusions Even though there were similarities between perspectives, each one underlined different areas of functioning, showing the importance of including different perspectives in order to get a complete view of functioning and disability in individuals with schizophrenia.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.325