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Assessment of risk factors of treatment discontinuation among patients on paliperidone palmitate and risperidone microspheres in france, germany and belgium – a retrospective database study

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doi: 10.1192/j.eurpsy.2021.437

Introduction: Long-acting antipsychotics (e.g. 1-monthly (PP1M) / 3-monthly (PP3M) injection forms of paliperidone palmitate) have been developed to improve treatment continuation in schizophrenia patients.
Objectives: To assess risk factors of treatment discontinuation in patients on paliperidone palmitate and risperidone microsphere. Additionally, treatment continuation between patients with PP1M and PP3M was compared.
Methods: The IQVIA Longitudinal Prescription databases were used. Risk factors of treatment discontinuation were identified by a multilevel survival regression using Cox proportional hazards model. Kaplan Meier analyses were performed by identified significant risk factors.
Results: 25,361 patients (France: 9,720; Germany: 14,461; Belgium: 1,180) were included. Over a one-year follow-up period, a significant higher treatment continuation was observed for patients newly initiated on paliperidone palmitate (46.2%) than those initiated on risperidone microspheres (14.6%). Additionally, a significantly higher treatment continuation was found for 'stable' PP3M patients (81.8%) than 'stable' PP1M patients (62.9%). Patients were more likely to discontinue when drugs prescribed by GP only (HR = 1.68, $p < 0.001$ vs. psychiatrist only) or being females (HR = 1.07, $p < 0.001$), whereas discontinuation rate decreased with age (31-50 years: HR = 0.95, $p = 0.006$ and > 50 years: HR = 0.91, $p < 0.001$ vs. 18-30 years).
Conclusions: Paliperidone palmitate was associated with a significantly higher treatment continuation than risperidone microspheres. Treatment continuation is likely to be improved by targeting young patients (18-30 years), empowering GPs with mental health knowledge and managing patients by a collaborative primary care-mental health model. Further research is needed to understand why females have more treatment discontinuation.

Disclosure: Rui Cai, Flore Decuypere and Pierre Chevalier are IQVIA employees and served as paid consultants to Janssen during the conduct of this study. Antonie Wimmer, Pascal Guillon, Stefan Pype, Annabelle Godet, Valeria Timtschenko are Janssen employees.
Keywords: antipsychotics; PP1M; PP3M; risperidone microsphere; treatment continuation

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Lep gene and leptin concentration in serum of schizophrenia patients with metabolic syndrome

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doi: 10.1192/j.eurpsy.2021.438

Introduction: Schizophrenia is associated with lower life expectancy due to cardiovascular disease. Metabolic syndrome (MetS) occupies an important place among the main problems. Indicators of hormones regulating metabolism may be appealing candidates as biomarkers of metabolic side-effects. Certain role belongs to genetic factors that might be the basis of sensitivity to development of MetS.
Objectives: The aim is to study polymorphisms of leptin gene (LEP) and serum leptin concentration in schizophrenia patients with metabolic syndrome.
Methods: After obtaining informed consent, patients with schizophrenia (ICD-10: F20) were included: 91 patients for biochemical research and 463 patients for genotyping. Patients were divided into two groups: 46 (119) with MetS; 45 (344) without it. Concentration of leptin was measured on an analyzer MAGPIX (Luminex, USA). Determination of 4 polymorphisms (rs2167270, rs3828942, rs10954173, rs4731426) of LEP was performed by PCR. Differences were considered significant at $p<0.05$.
Results: The leptin concentration is significantly ($p<0.001$) higher in MetS (13511.5 [7392.5; 28278.75] pg/ml) compared to patients without MetS (6662 [2131.5; 11380] pg/ml). Significant differences were found in the distribution of rs3828942 (GG:GA:AA): 25.9%:44%:30.2% in MetS and 31.2%:52.6%:16.2% without MetS ($\chi^2=10.545$, $p=0.005$). The genotype AA and the allele A have a predisposing effect on the development of MetS ($OR_1=2.247$, C.I:1.248-4.046; $OR_2=1.475$, C.I:1.093-1.991, $\chi^2=6.49$, $p=0.01$).
Conclusions: A number of features are observed in patients with MetS, which impair the functioning of patients. These investigations should aim to optimize the approach to assess the risk of MetS. The study was supported by grants from the RSF 19-75-10012 (genetic research) and 18-15-00011 (determination of leptin concentration)

Disclosure: The study was supported by grants from the Russian Science Foundation №19-75-10012 (genetic research) and №18-15-00011 (determination of leptin concentration)
Keywords: schizophrénia; gene polymorphisms; Metabolic syndrome; leptin

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Conversation analysis, psychopathology and subjective experience in patients with schizophrenia

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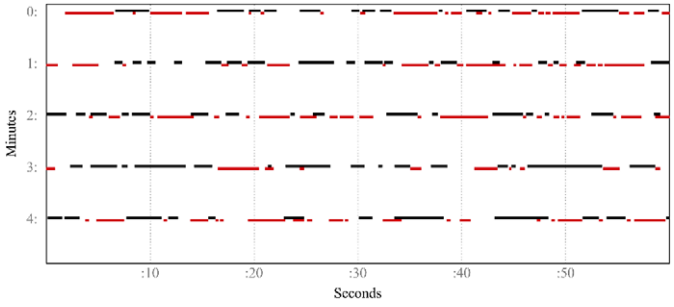
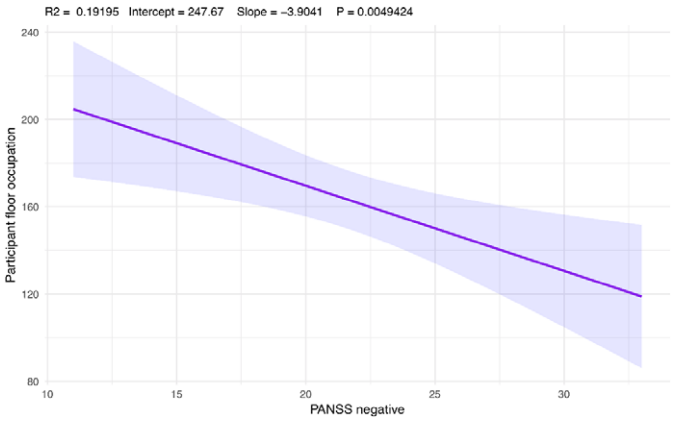
doi: 10.1192/j.eurpsy.2021.439

Introduction: Patients with schizophrenia show severe difficulties in interpersonal communication, including impairments in

conversation skills, like the turn-taking. To our knowledge, very few studies to date have taken into account conversation analysis in order to investigate turn-taking in schizophrenia patients.
Objectives: To investigate the conversational patterns in schizophrenia patients; to assess possible associations between dialogic features, abnormal subjective experiences and symptom dimensions.
Methods: Thirty-six patients with Schizophrenia underwent an interview, subsequently analyzed with an innovative semi-automatic analysis. Positive and Negative Syndrome Scale (PANSS) was adopted for the investigation of psychopathology and Examination of Anomalous Self Experience (EASE) for Self-Disorders.
Results: Dialogic exchanges are graphically represented in Figure 1. An inverse correlation was found between participant speaking time and PANSS negative symptoms score (r = -0.44, p value < 0.05; Figure 2), whereas no associations were found between conversational variables and PANSS positive or disorganization dimensions. Finally, a positive correlation was found between the EASE item "spazialization of thought" and average pause duration (r = 0.42, p value < 0.05).





Conclusions: The finding of a relationship between negative symptoms and conversational patterns suggest that conversational features in schizophrenia are expression of the "core" negative dimension of the disorder. The association with the phenomenon of thought spatialization seems to suggest that the disturbances of the stream of consciousness impact on natural dialogic interactions. Ultimately, conversation analysis seems a promising tool to study dialogic exchanges of patients with schizophrenia.

Disclosure: No significant relationships.
Keywords: conversation; psychopathology; self disorders; schizophrénia

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Hebephrenic schizophrenia as a variant of frontotemporal dementia – the true dementia praecox?

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doi: 10.1192/j.eurpsy.2021.440

Introduction: Frontotemporal Demential (FTD) is a neurodegenerative disorder evolving the frontal or temporal brain lobes. They have been described six variants. Behaviour variant (BvFTD) is the most common, and is characterized by changes in social behaviour and conduct, with loss of social awareness and poor impulse control. Hebephrenic schizophrenia (HSz), or disorganized schizophrenia, was recognized as a schizophrenia subtype, characterized by desorganized behaviour and a cognitive deteriorization. Subtypes of schizophrenia are no longer recognized as separate conditions neither in the Diagnostic and Statistical Manual of Mental Disorders, nor in the new International Statistical Classification of Diseases.
Objectives: To review the literature about the concepts of hebephrenic schizophrenia and their similarities with the concept of frontotemporal dementia
Methods: Narrative review of the literature on PubMed/MEDLINE, using the keywords "hebephrenic szchizophrenia" AND "frontotemporal dementia". Only articles in English were included.
Results: Some authors described dificulty in establish a diferential diagnosis between HSz and BvFTD. HSz has an earlier onset. However, BvFTD is an early age dementia. The fenomenology of both diseases is similar, and schizophrenia was historical conceptualized as praecox dementia. Frontotemporal abnormalities are common neuroimagiological findings in schizophrenia. Clinically, FTD shows a profound alteration in personality and social conduct, emotional blunting and loss of insight. Memory, intellectual functions, executive and attentional abilities may be disturbed in both.
Conclusions: A diferential diagnosis between HSz and BvFTD is dificult to establish (clinically and imagiologically). The response to treatment is weak in both. It should be investigated the possibility they could be the same syndrome, onseting in diferent ages.

Disclosure: No significant relationships.
Keywords: frontotemporal dementia; schizophrénia; Dementia praecox; hebephrenia

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Lurasidone in adolescents with schizophrenia: Sustained remission and recovery during 2 years of open-label treatment

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doi: 10.1192/j.eurpsy.2021.441