cognitive and/or functionality parameters. A qualitative synthesis was performed due to heterogeneity in data.

Results: According to the information collected through our systematic review, DD patients tend to perform worse than healthy control in tests assessing cognitive functions. Results are not as conclusive regarding comparison between DD and schizophrenia, with mixed outcomes. When it comes to functionality, results are not conclusive either, with some degree of evidence pointing towards a better functioning in patients with DD in comparison to patients with schizophrenia.

Conclusions: Results agree with many authors who consider both conditions as part of a psychosis spectrum. Cognitive interventions, such as cognitive remediation, must be studied for their potential role in the treatment of patients with DD.

Keywords: Delusional disorder; Systematic review; Functionality; cognition

EPP1200

Impact of a first psychosis program in clinical variables after two years of follow-up

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Introduction: Early Intervention Services for Early-Phase Psychosis have shown efficacy and effectiveness (Correl C, JAMA). In Pamplona, Spain, there is an Early Intervention Program that has been providing multiprofessional assistance for First Psychotic Patients for the last two years.

Objectives: The aim of this study is to analyze the longitudinal effects of the different interventions in several clinical variables applied to 240 patients during two years of follow-up: CASH dimensions, substance abuse, antipsychotic type and dosage, remission rates, re-hospitalization rates and DSM 5 diagnoses.

Methods: We apply a standard evaluation protocol to every patient at different times: premorbid, initial time and at months 6, 12, 18 and 24. We analyse the data with the SPSS statistical program to see the results in these variables.

Results: The positive and disorganized dimensions show an evident decline during the treatment. The doses of antipsychotic drugs are low and tend to decline. 87% of patients are in monotherapy. The most frequent DSM 5 basal diagnosis is Brief Psychotic Episode, but during the follow-up the Diagnosis of Schizophrenia increase from 14,6% at baseline up to 46,2% at month 24. The remission rates are about 65% after 24 months.

Conclusions: Early Intervention Services improve psychopathological dimensions, prevents from re-hospitalization, allows the use of lower doses of Antipsychotic Drugs and improve the rates of remission. However, the diagnosis of Schizophrenia is high, so there is no evidence that these programs prevents from chronicity, but provide a better quality of life.

Keywords: psychosis; early intervention; schizophrenia; First Psychosis Program

EPP1201

Symptoms of psychosis, depression, and suicide ideation among individuals in a first episode of psychosis: The mechanistic role of clinical insight and cognitive functioning

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Introduction: First-episode psychosis (FEP) is a particularly high-risk period in which risk for suicide death is elevated by 60% as compared to individuals in later stages of psychotic illness. Clinical insight and cognition have been studied in schizophrenia in relation to suicide ideation and attempt, yet, less is understood within the context of early-phase of illness and FEP.

Objectives: This study examined whether clinical insight and cognitive functioning served as a mechanism in the relationships between depression, positive symptoms, negative symptoms, and suicide ideation over time among individuals in FEP.

Methods: Data were obtained from the Recovery After an Initial Schizophrenia Episode (RAISE) project. Participants (n=404) included adults in FEP between ages 15 and 40. Structural equation modeling was used in Mplus8 to examine the proposed mediation model.

Results:

Clinical insight and working memory functioned as mechanisms in the relationships between depression, positive symptoms, negative symptoms, and suicide ideation. As depression decreased and positive and negative symptoms increased, clinical insight was shown to be poorer, which in turn related to decreased suicide ideation. As positive symptoms increased and negative symptoms decreased, working memory was shown to be stronger, which in turn related to decreased suicide ideation.

Conclusions: Implications surround the importance of cognitive testing and approaches aiming to strengthen cognitive functioning given the relationships between cognition and suicide ideation in FEP. Also, of importance, it is imperative practitioners have