

BAVQ, Intervention group showed a statistically significant reduction in Malevolence ($P=0.008$), Engagement ($P=0.001$); and showed a statistically significant increase in Resistance ($P=0.049$) compared to control.

Conclusions Brief cognitive behavioral therapy for auditory hallucinations can improve severity of schizophrenia, increase the level of functioning and improve the beliefs about the voices.

Keywords Schizophrenia; Auditory hallucinations; Brief cognitive behavioral therapy

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.662>

EW545

The effect of a 16-week walking program on biomarkers, physical fitness, health related quality of life and self-perceptions of adults with schizophrenia

E. Oliveira^{1,*}, M. Uba-Chupel², D. Sousa³, C. Rocha⁴, A. Teixeira², P. Ferreira²

¹ Sisters Hospitaliers of the Sacred Heart of Jesus, Occupational Therapy - Casa Saúde Rainha Santa Isabel, Coimbra, Portugal

² Faculty of Sport Sciences and Physical Education- University of Coimbra, Research Unit for Sport and Physical Activity, Coimbra, Portugal

³ Sisters Hospitaliers of the Sacred Heart of Jesus, Nurse - Casa Saúde Rainha Santa Isabel, Coimbra, Portugal

⁴ Polytechnic Institute of Coimbra- ESTESC - Coimbra Health School, Department Complementary Sciences- INESCC, Coimbra, Portugal

* Corresponding author.

Introduction People with schizophrenia exhibit low levels of physical activity, which have impact on physical and mental health as well as overall quality of life (QOL). Mental and physical benefits of exercise are known, although the mechanisms through which physical exercise improves schizophrenia symptoms are not fully understood.

Objectives To assess the effect of a 16-week exercise program (EP) on the expression of BDNF and S100B biomarkers, physical fitness, health related quality of life and self-perceptions of adults with schizophrenia.

Methods Thirty-five patients with schizophrenia (PwSZ) were divided in three groups Institutionalized Patients ($n=11$); Psychosocial Rehabilitation ($n=13$); and Control Group ($n=11$). The EP consisted of one-hour walking session three times a week during 16 weeks. All participants were assessed before and after EP using the six minutes walking test, a psychological tests battery including MOS Short Form 36, Rosenberg Self-Esteem Scale, Physical Self-Perception Profile, Satisfaction with Life Scale as well as the BDNF and S100B measurements using serum analysis.

Results No significant statistical differences were found both for BDNF and S100B levels as a result of exercise. Additionally, no significant statistical differences were found for Physical Self-concept and Global Self-esteem changes as a result of the walking program (WP). However, PwSZ showed significant statistical differences on the satisfaction with life ($P<0.05$) and on the perceived health related QOL ($P<0.05$) in all groups participating in the EP.

Conclusion In spite of the limited impact of the WP in PwSZ, this group may obtain positive outcomes of the exercise participation based on a more positive attitude towards life.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.663>

EW546

Social cognition across stages and forms of schizophrenia

O. Papsuev*, M. Minyaycheva, L. Movina, I. Gurovich

Moscow Research Institute of Psychiatry, Outpatient Psychiatry and Organization of Psychiatric Care, Moscow, Russia

* Corresponding author.

Introduction Social cognition is considered as a main predictor of functional outcomes and a candidate for endophenotype of schizophrenia. We hypothesize that social cognition capacities follow the course of schizophrenia as a prodromal disorder.

Objective To investigate social cognition across different groups of patients with schizophrenia and schizophrenia spectrum disorders.

Aims To evaluate social cognitive impairments in patients with first episode psychoses (FEP), chronic schizophrenia (CS) and schizophrenia-spectrum disorders (SSD).

Methods In a cross-sectional study, 71 patients with FEP, CS and SSD were assessed with a battery of clinical and social cognitive tests. Three key social cognitive domains were assessed: emotion perception, Theory of Mind and attributional style.

Results Patients with schizoaffective disorder and schizotypal disorder showed better scores in Hinting task (mean ranks: 47.0 and 39.9 respectively) than patients with less favourable forms of schizophrenia (mean ranks: 24.7 and 30.2 respectively) ($P=0.003$). Patients with FEP showed better results in Hinting task (18.1 ± 2.4) versus CS patients (17.4 ± 2.0) ($P<0.05$). No differences in emotion perception (Ekman-60 task) among FEP and CS patients were detected. Patients with schizoaffective disorder showed better scores in emotional processing comparing to all forms of schizophrenia patients (mean ranks 49.1 vs. 30.1, 34.5, 28.0, $P<0.05$). No significant differences in attributional style were registered.

Conclusions Emotion perception and Theory of Mind domains show different level of impairment across FEP and CS patients and across forms of schizophrenia. Further longitudinal studies to establish how social cognition domains mirror the course and severity of schizophrenia and SSD are needed.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.664>

EW548

Tolerability and safety of long-acting injectable aripiprazole

A. Porras Segovia^{1,*}, P. Calvo Rivera¹, B. Girela Serrano², L. Gutierrez Rojas¹

¹ University Hospital San Cecilio, Mental Health Services, Granada, Spain

² Santa Ana Hospital, Mental Health Services, Motril, Spain

* Corresponding author.

Introduction Long-acting injectable aripiprazole is the most recently introduced depot treatment in schizophrenia.

Objectives The objective of this study is to determine the tolerability and safety of this new treatment.

Aims The aim is to provide useful information regarding the use of this new drug.

Methods Our sample consists on 20 patients treated with a monthly dose of long-acting aripiprazole. They were previously stabilized on oral aripiprazole before the first injection. The data on tolerability and safety were obtained by face-to-face interviews, using the Hogan Drug Attitude Inventory, the Patient Satisfaction with Medication Questionnaire and the UKU Side Effects Scale.

Results Our sample consists of 20 patients, with a 50/50 gender distribution and a mean age of 39 years. The average score in the satisfaction scale Hogan was positive (an average of 7.25). In