EPV0641

Correlation between alterations in cognitive function and mean severity of psychotic symptoms in patients diagnosed with schizophrenia spectrum disorders and its clinical application

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Introduction: Schizophrenia spectrum disorders (SSD) are characterized by heterogeneity. Cognitive decline, due to recent research results, appears to be a core symptom of schizophrenia. Dimensional approach of SSDs allows the separate assessment of each psychotic symptom, as well as cognitive functioning. Thus, correlations among them and their alterations, between baseline and follow up examination, can be estimated.
Objectives: The objective of this study is to correlate observed alterations in cognitive performance in patients diagnosed with schizophrenia spectrum disorders, compared with baseline measurement, with alterations in severity of psychotic symptoms.
Methods: 85 Patients diagnosed with schizophrenia spectrum disorders, attended in the Outpatient Department of Early Intervention in Psychosis of University of Thessaly, Greece and its affiliated psychiatric clinics, were evaluated the last 24 months, using the CRDPSS (Clinician-Rated Dimensions of Psychosis Symptoms Severity) measure and the validated greek version of the MoCA test. 37 of them had a follow up evaluation. The relationship between the two new categorial variables [dMoCA (positive- negative) and dmCRDPSS7 (positive-negative)] was assessed with x^2 test.
Results: Alterations in cognitive function, as assessed with MoCA scale and dMoCA variable, were inversely correlated with the alteration in mean severity of other dimensions of psychosis symptoms (dmCRDPSS7), $x^2(1, N = 37) = 9.4891$, p = .0021.
Conclusions: Our data suggest that alterations in cognitive performance may predict an inverse effect in the severity of psychotic symptoms. Periodic follow up of cognitive functioning in patients diagnosed with schizophrenia spectrum disorders is suggested, since it can be interpreted in clinically useful information considering relapse.

Disclosure: No significant relationships.
Keywords: Schizophrenia spectrum disorders; cognitive assessment; Cognitive decline; Clinician-Rated Dimension of Psychosis Symptom Severity

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Impact of early use of long acting paliperidone (1 and 3 monthly) in a first-episode psychosis sample

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Introduction: Relapse prevention is a key objetive for patients with a First Episode Psychosis (FEP) and the low adherence to antipsychotic (AP) treatment is the main reason for relapse after a FEP.
Objectives: There are no clear recommendations about the early use of long-acting injectables (LAIs) in FEP. We review the impact on hospitalization rates of the early use (earlier than 1 year after the inclusion in our Early Intervention Service "Lehenak") of LAI paliperidone in a FEP sample.
Methods: We evaluated in a naturalistic study a sample (N=384) of patients with a FEP. We carried out a mirror-design study to compare the numer of hospitalizations before and after the introduction of LAI paliperidone (1 and 3 monthly) in early users (<1 year) vs late users (>1 year).
Results: A total of 384 FEP patients with LAI paliperidone were assessed.

	Early Paliperidone LAI (n=201)	Late Paliperidone LAI (n=173)	Within groups comparisons t (p)
Hospitalizations pre-LAI mirror period (media, standard deviation)	1.76 (1.97)	2.22 (2.60)	1,87 (0.06)
Days in hospital pre-LAI mirror period	21.42 (28.28)	28.02 (38.27)	1.87 (0.06)
Hospitalizations post-LAI mirror period	0.68 (1.61)	0.80 (1.74)	0.73 (0.46)
Days in hospital post-LAI mirror period	15.17 (40.58)	18.78 (45.24)	0.81 (0.42)

Conclusions: There was no difference between the early and late introduction of LAI Paliperidone in the number of hospitalizations after treatament. There was a trend to present more previous hospitalizations and days in hospital in late users. This could support an earlier use of paliperidone LAI to prevent an excess of hospitalizations due to late introduction.

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Keywords: outcome; Relapse; first-episode psychosis; long-acting paliperidone

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Acute polymorphic psychosis: An interesting case report

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Introduction: Acute Polymorphic Psychotic Disorder is a psychotic disorder with an acute onset, presenting thought and perception disorders variable into hours. Often, an emotional fluctuation is present and it may have a sudden onset and a rapid remission.
Objectives: The review's objective is to manifest acute polymorhic psychotic disorders and possible effective medical interventions.