cluster 1 was significantly lower than that in cluster 2 and cluster 3 (Table 2, P = 0.0042 and 0.0208, respectively). 

Conclusion For the first time, we obtained effectiveness patterns of amisulpride-treated Chinese patients. Age and gender may be predictors of effectiveness.

Fig. 1 Time series clustering of PANSS positive score. Four clusters and fitting curves (thick lines) are presented.

Table 1 Gender comparison of negative PANSS clusters.

<table>
<thead>
<tr>
<th>Cluster 1</th>
<th>Cluster 2</th>
<th>Cluster 3</th>
<th>Cluster 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>(n=12)</td>
<td>(n=16)</td>
<td>(n=12)</td>
<td>(n=12)</td>
</tr>
<tr>
<td>Age (Mean±SD)</td>
<td>20.3±16.97</td>
<td>22.8±12.33</td>
<td>27.3±6.41</td>
</tr>
<tr>
<td>P value of pairwise comparison</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>VS Cluster 1</td>
<td>0.4999</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>VS Cluster 2</td>
<td>0.7080</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>VS Cluster 3</td>
<td>0.0031*</td>
<td>0.0074</td>
<td>-</td>
</tr>
<tr>
<td>VS Cluster 4</td>
<td>0.0031*</td>
<td>0.0074</td>
<td>0.0031*</td>
</tr>
</tbody>
</table>

* P<0.05

Table 2 Gender comparison of negative PANSS clusters.

<table>
<thead>
<tr>
<th>Cluster 1</th>
<th>Cluster 2</th>
<th>Cluster 3</th>
<th>Cluster 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>(n=14)</td>
<td>(n=14)</td>
<td>(n=12)</td>
<td>(n=12)</td>
</tr>
<tr>
<td>Female, n (%)</td>
<td>53 (39.2)</td>
<td>53 (38.5)</td>
<td>26 (44.6)</td>
</tr>
<tr>
<td>Male/Female ratio</td>
<td>1.030</td>
<td>1.208</td>
<td>2.194</td>
</tr>
<tr>
<td>P value of pairwise comparison</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>VS Cluster 1</td>
<td>0.0043*</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>VS Cluster 2</td>
<td>0.0085*</td>
<td>-0.0099</td>
<td>-</td>
</tr>
<tr>
<td>VS Cluster 3</td>
<td>0.0085*</td>
<td>-0.0099</td>
<td>-</td>
</tr>
<tr>
<td>VS Cluster 4</td>
<td>0.0085*</td>
<td>0.0085*</td>
<td>0.8782</td>
</tr>
</tbody>
</table>

* P<0.05

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**EV1269**

Clinical-immunological predictors of prognosis of the efficiency of antipsychotic therapy with amisulpride in schizophrenia

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Introduction Detection of clinical-biological predictors of the efficiency of antipsychotic therapy in schizophrenic patients, correction and individualization of therapeutic indication of antipsychotics are relevant questions of modern psychiatry. Immune dysfunctions, disturbance of psychoneuroimmunological interaction, metabolic imbalance worsen clinical pattern of disease, contribute to formation of therapeutic resistance and side effects, and decrease efficiency of treatment of patients.

Objective To detect clinical-immunological predictors of the efficiency of therapy of schizophrenic patients with amisulpride.

Methods We examined 19 schizophrenic patients, aged 18–64 years, who received treatment with amisulpride (Solian). The psychometric scale PANSS was used for evaluation of dynamics of psychopathological symptoms. Therapy efficiency was evaluated using CGI scale. The immunological investigation included identification of phenotypes of surface receptors of immunocompetent cells, level of IgM, IgG, IgA, phagocytic activity of leucocytes. Research was carried out in two points: first—at admission, second—by week 6 of treatment. Predictors of efficiency were identified relying on the analysis of interquartile ranges of clinical-immunological parameters.

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

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**EV1268**

Treatment of drug-resistant schizoaffective disorder with aripiprazol depot off-label: A case report


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Introduction We expose a woman diagnosed with schizoaffective disorder 2 years ago, before she received several diagnostics. She was admitted to the psychiatry unit with hyperactivity, pressured speech without taking an appropriate turn, flight-of-ideas, irritability, expansiveness, emotional liability, ideas of reference and insomnia without diurnal tiredness. In addition, she admitted having abandoned the medication one month ago. She was diagnosed with manic episode with psychotic symptoms and the medication was reintroduced. After two weeks, no response was observed so we decided to introduce ability depot 600 mg/3 weeks.

Objectives We want to show that is possible the use of ability depot off-label in patients with a special difficulty in handling. Also, we want to show that higher doses are not dangerous and it’s possible to study new treatment guidelines for ability depot.

Methods We use the Positive and Negative Syndrome Scale (PANSS) pre (the day of the introduction) and post (at two weeks) treatment with aripiprazol depot; the Clinical Global Impression rating scale (CGI), also pre and post.

Results We have obtained a punctuation of 180 in PANSS the day of the introduction of the aripiprazol depot and 45 at two weeks. In addition, we obtained 6 in CGI the day of the introduction and 3 at two weeks.

Conclusions In this case, aripiprazol depot has shown good tolerability and efficacy for the acute phase of schizoaffective disorder at higher doses than recommended in clinical guidelines. The efficacy and safety data are consistent with short-term, placebo-controlled studies of aripiprazol depot conducted in similar populations.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1599
Results  Predictors of high efficiency of amisulpride therapy were identified: clinical–total score according to PANSS less than 70, sum of scores according to subscale of negative disorders is more than 31, and immunological–number of HLADR-lymphocytes below $0.34 \times 10^9/\text{L}$, CD16-lymphocytes more than 0.18 $\times 10^9/\text{L}$.

Conclusion Complex of informative clinical-immunological criteria is proposed, which enables prognosis of the efficiency of psychopharmacotherapy for patients at admission. It enables optimizing the choice of differentiated therapeutic tactics and heightening the quality of specialized medical care for schizophrenic patients.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1599

EV1271

Antipsychotic polypharmacy among schizophrenia outpatients


EV1272

Human induced pluripotent stem cells (hiPSCs) in schizophrenia: Modelling the disease and the treatment response

M. Marcattili, F. Marsoner, A. D’Agostino, S. Scarone, L. Conti

EV1270

Can writing be used to study and improve the socio-cognitive functioning of individuals diagnosed with schizophrenia?

L. Lucie, A. Khan, C. Daiute

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1601