Disclosure: No significant relationships.
Keywords: schizophrénia; Brexpiprazole; Clozapine-Treatment-Resistant; Combination Therapy

EPP0734

Disentangling early and late onset of psychosis in women

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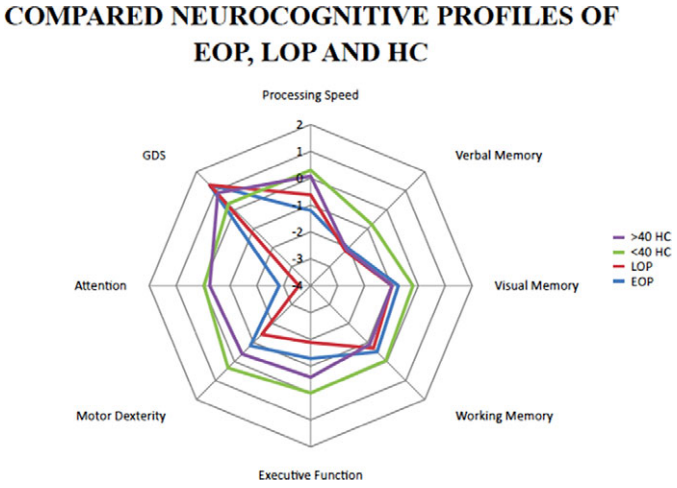
Introduction: Women present a second peak of incidence of psychosis during menopausal transition, partially explained by the loss of estrogen protection conferred during the reproductive years. Despite this, few studies compare sociodemographic, biological, clinical varibles and neurocognitive performance between women with early onset of psychosis (EOP) and those with late onset of psychosis (LOP).
Objectives: Our aim was to characterize both groups in a large sample of women, of which 294 were FEP patients (EOP = 205; LOP = 85) and 202 were healthy controls (HC) grouped following cutoff point (<>40 years of age) in previous studies.
Methods: Clinical and laboratory assessments were completed. Neurocognitive performance was also evaluated, and a cognitive global deficit score (GDS) was derived. ANCOVA was used for comparisons.
Results: EOP women were more frequently single and unemployed than comparable HC. Cholesterol levels in LOP women were higher than those of EOP women. LOP presented less severe symptoms, and higher scores in processing speed and premorbid IQ than EOP patients. Cannabis and alcohol use were also more frequent in EOP than LOP women.



Conclusions: Women with EOP and LOP show several sociodemographic, neuropsychological and clinical differences which may be valuable for planning personalized treatment emphasizing in socialization and differential generational dynamics. Some of these differences may be due to the aging process, while others might be influenced by factors such as lack of estrogen neuroprotection. In turn, drug consumption, low IQ and recent experienced trauma could as well reduce efficacy of hormonal neuroprotection.

Disclosure: No significant relationships.
Keywords: First Episode Psychosis; women; Early onset psychosis; Late onset psychosis

EPP0735

A pilot study of the associations between inflammatory markers and the presence of „deficit syndrome" in schizophrenia patients

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Introduction: According to current knowledge inflammation seems to be strongly associated with pathogenesis of schizophrenia. Multiple studies and meta-analyses showed increased levels of inflammatory markers in plasma of schizophrenia patients. Individual studies have shown a relationship between the levels of inflammatory markers and the presence of deficit syndrome, but their results are inconsistent.
Objectives: Analysis of associations between inflammatory markers and the presence of deficit syndrome in schizophrenia.
Methods: Studied group consisted of 50 patients with diagnosed schizophrenia (F20) for at least 10 years, including 14 patients with deficit schizophrenia (DS) and 36 patients with non-deficit schizophrenia (NDS). DS and NDS did not differ significantly in age, BMI, duration of schizophrenia, types and doses of antipsychotics (chlorpromazine equivalent), but differed in sex (x2=4.28,p=0.039). Concentrations of inflammatory markers i.e. IL-6,IL-8,IL-10, TNFα,IFNγ,CRP were measured in serum using sensitive ELISA assays.
Results: Initial analysis showed significantly lower concentration of IL-8 in DS compared to NDS (t=-3.18,p=0.002). This association remain significant (F=7.63,p=0.0085) after co-varying for age, sex, BMI, duration of schizophrenia, type of antipsychotic medications and antipsychotics doses. Multiple logistic regression showed that female gender (OR=0.18 [0.04-0.87],p=0.034) and higher IL-8 concentrations (OR=0.03 [0.002-0.39],p=0.007) are independent predictors of lower odds of having DS.
Conclusions: Low IL-8 concentrations seem to be promising predictor of the presence of DS in schizophrenia patients, but results need further investigations. The research was funded by Polish Minister of Science and Higher Education's program named "Regional Initiative of Excellence" in 2019–2022, grant number 002/RID/2018/2019 to the amount of 12000000PLN and by National Science Centre, Poland (2019/03/X/NZ5/00719)