

EV1224

Characteristics and duration of untreated illness in correlation with insight level of first time diagnosed schizophrenia patients in rural region of Latvia

L. Berze^{1,2,*}, K. Pavlovs³, K. Slikova³, V. Bodins², I. Samule², N. Kurakina⁴, I. Smonins⁵, E. Rancans³

¹ Rigas Stradins University, Department of Psychiatry and Addiction disorders, Riga, Latvia

² Daugavpils Psychoneurological Hospital, Department of acute psychosis, Daugavpils, Latvia

³ Rigas Stradins University, Department of Psychiatry and Addiction disorders, Riga, Latvia

⁴ Daugavpils Psychoneurological Hospital, Department of first time psychosis, Daugavpils, Latvia

⁵ Daugavpils Psychoneurological Hospital, Department of differential diagnosis in psychiatry, Daugavpils, Latvia

* Corresponding author.

Introduction Improved insight level among schizophrenia patients is predictive for better illness prognosis.

Objective Explore factors connected to insight.

Aim Evaluate the insight level and clinical characteristics of first time hospitalized schizophrenia spectrum patients.

Methods All consecutive first time hospitalized schizophrenia spectrum patients in a psychiatric hospital from 01.01.2016–26.09.2016. Patients were interviewed upon hospitalization and at the discharge with Scale for the assessment of positive symptoms (SAPS) and negative symptoms (SANS), Schedule of assessment of insight-extended (SAI-E), The Calgary depression scale for schizophrenia (C-sch), sociodemographic and clinical data were collected. All participants signed written informed consent and the study was approved by the Riga Stradins University Ethics committee.

Results From 45 first episode patients, 38 met the inclusion criteria. Mean age was 37.66 years (SD: 11.48 years), the average duration of untreated illness (DUI) was 40.5 months (SD: 57.35 months). Psychopathologic symptoms and insight levels evaluated in scores in the 1st and 2nd interviews were as follows: SAPS 69.11 (SD: 20.78) and 33.61 (SD: 18.04), SANS 63.21 (SD: 25.30) and 40.95 (SD: 24.47), SAI-E 15.50 and 27.24 (SD: 13.24), $P < 0.001$, C-sch 8.50 (SD: 5.31) and 4.27 (SD: 2.86), $P < 0.05$. There was no statistically significant correlation between DUI and insight level. A higher level of insight at hospitalization correlated with higher levels of depression: $r = 0.569$, $P < 0.001$.

Conclusions We noticed a tendency that lower insight levels might correlate with longer periods of untreated illness. We found that higher insight levels correlated with higher symptoms of depression.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1554>

EV1225

A gender approach in prodromes of psychosis

C.M. Calahorra^{1,*}, M. Guerrero Jiménez², B. Giralá Serrano²

¹ Hospital Universitario San Cecilio, Unidad de Salud Mental, Granada, Spain

² Santa Ana Hospital, Psychiatry, Granada, Spain

* Corresponding author.

Background Only 21% of patients included in the South of Granada's First Episodes Program in the year 2014 were women. Studies do not use to focus on sex differences at first-episode samples and it can be masking some relevant variables in this population.

Aims In this exploratory study, we aim to focus on gynaecological consultations during the period of untreated psychosis (DUP) at first episodes of psychosis in women.

Methods A retrospective clinical-cases review of medical histories was made searching for sociodemographic variables, consultations during DUP and psychotic prodromal outcomes.

Results The average age of the sample was 23 years. The average of DUP was one to three months. Sixty percent of referees to mental health services were from primary care and 20% from emergency services. The main symptom was persecutory or prejudice delusions. Thirty-six percent of them were related to sexuality or pregnancy. In most cases, the demands were not bizarre. When a wide history was made and they were properly explored, a delusional theme was appreciated and the reason for consultation was not justified. Eg. Postcoital pill order for not taking precautions, in a telepathic relationship. Forty percent of claims were made in primary care. Half of them were assessed by a gynecologist. Sixty percent were treated in the emergency room.

Conclusions We conclude that these data are relevant for specialists. Both for efficient resource management and for early detection of incipient psychosis. Gynecological abnormal demands are common in consultations to health services for specific malaise during the period of untreated psychosis.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1555>

EV1226

Paliperidone palmitate: Experience in a community mental health unit

L. Carrión Expósito (Psychiatrist)^{1,*},

G.M. Chauca Chauca (Psychiatrist)¹,

E.L. Guadalupe (Psychiatrist)²

¹, UGC-Salud Mental Hospital Infanta Margarita, Córdoba, Spain

² USMC Cáceres, Hospital Nuestra Señora de la Montaña, Cáceres-Spain, Córdoba, Spain

* Corresponding author.

Introduction There are many jobs that offer advantages of treatment with long-acting injectable in psychosis.

Objective To know the changes in the different variables after the start of paliperidone palmitate (PP).

Material and method We performed a descriptive and retrospective study. Were evaluated patients who received maintenance therapy with PP during 48 months.

Results The sample was composed of 29 patients: 72.4% men and 27.6% women. Average age of 46.21 years. In Figures 1, 2 and 3 show data obtained in relation to compliance with treatment, relapse, maintenance dose, number of admissions and visits to emergency departments respectively.

Conclusions The administration of PP is associated with a higher level of compliance with treatment. The patients presented a lower number of relapses, hospitalizations and visits to the emergency room. The maintenance dose more used is 150 mg.