

Madrid; ⁶Psychiatry, Hospital Virgen de la Luz, Cuenca and ⁷Salud Mental, Complejo Hospitalario Universitario de Albacete, Albacete, Spain

*Corresponding author.

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Introduction: Negative symptoms has been classically associated with cognition, psychosocial functioning and quality of life in patients with schizophrenia. But negative symptoms are not a unitary construct, encompassing two different factors: diminished expression, and motivation and pleasure. Few works have studied the relationship between these two different negative symptoms factors and cognition (neuro and social cognition), psychosocial functioning and quality of life, jointly, in patients with a first psychotic episode of schizophrenia.

Objectives: The objective of the present work was to study, in a sample of patients with a first psychotic episode of schizophrenia, the relationship between the negative symptoms (diminished expression and motivation and pleasure) and neurocognition, social cognition, functioning and quality of life.

Methods: The study was carried out with 82 outpatients with a first psychotic episode of schizophrenia from two Spanish hospitals ("12 de Octubre" University Hospital, Madrid and "Virgen de la Luz" Hospital, Cuenca). The patients were assessed with the Clinical Assessment Interview for Negative Symptoms (CAINS) for evaluating diminished expression (EXP) and motivation and pleasure (MAP) symptoms, the MATRICS Consensus Cognitive Battery (MCCB) for evaluating neurocognition and social cognition, the Social and Occupational Functioning Assessment Scale (SOFAS), and the Quality of Life Scale (QLS).

Results: A negative correlation was found between neurocognition and the two negative symptoms subscales: CAINS-EXP ($r=-0.458$, $p<0.001$) and CAINS-MAP ($r=-0.374$, $p<0.001$); but with social cognition only CAINS-EXP was correlated ($r=-0.236$, $p=0.033$). Also, it was found a high negative correlation between SOFAS scores and CAINS-MAP ($r=-0.717$, $p<0.001$); and a medium negative correlation with CAINS-EXP ($r=-0.394$, $p<0.001$). Finally, QLS score was high correlated with both CAINS subscales: CAINS-EXP ($r=-0.681$, $p<0.001$) and CAINS-MAP ($r=-0.770$, $p<0.001$).

Conclusions: This study found a relationship between negative symptoms and neurocognition, social cognition, functioning and quality of life in a sample of patients with a first psychotic episode of schizophrenia. But the two different negative symptom factors, diminished expression, and motivation and pleasure, are associated differently with psychosocial functioning, but especially with social cognition where the relationship was only found with diminished expression symptoms.

Disclosure of Interest: None Declared

EPP1061

Switching Antipsychotic Medications in People with Schizophrenia: A 4-Year Naturalistic Study

R. Ceres^{1*}, M. Battipaglia¹, S. Donato¹, N. Attianese¹, G. M. Giordano¹, P. Bucci¹ and G. Cascino²

¹University of Campania Luigi Vanvitelli, Naples and ²University of Salerno, Scuola Medica Salernitana, Salerno, Italy

*Corresponding author.

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Introduction: Although generally effective in ameliorating the core manifestations of schizophrenia, antipsychotics (APs) may lead to only suboptimal responses or may be associated with a variety of treatment-related adverse events which require additional treatment strategies. Under such clinical circumstances, switching APs represents a rational treatment option.

Objectives: The present study aimed to identify the variables that predict AP switch and to quantify the frequency of this phenomenon in people with schizophrenia in real-life.

Methods: A secondary analysis was conducted on the data collected at baseline and at a 4-year follow-up from a large sample of community-dwelling Italian people with schizophrenia. Demographic and clinical variables as well as information about AP treatment were recorded at two time points. Over the 4-year period, 34.9% of the 571 participants switched the AP; in particular, 8.4% of participants switched from first-generation APs (FGAs) to second-generation APs or vice versa, while 8.2% of them switched to clozapine.

Results: Logistic regression models showed that combination of APs at baseline was negatively associated with AP switch, while treatment with FGAs and the presence of extrapyramidal symptoms at baseline were associated with AP class switch.

Conclusions: Although the aim of the present study was not to assess predictors of clinical relapse in people with schizophrenia, we might speculate that switching APs represents a surrogate indicator of treatment failure in some patients and could lead into relapse, which is a costly aspect of schizophrenia management in both economic and human terms. The sooner such a negative outcome can be predicted and managed, the sooner the treatment can be optimized to avoid it.

Disclosure of Interest: None Declared

Sexual Medicine and Mental Health

EPP1062

Temperament and Character among mothers of individuals with gender dysphoria: a case-control study

A. Talaei*, S. Omidvar Tehrani and Z. Talaei

¹Psychiatry and Behavioral Sciences Research Center, Mashhad University of Medical Sciences, Mashhad, Iran, Islamic Republic Of

*Corresponding author.

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Introduction: Parents of individuals with gender dysphoria may experience distress when dealing with their child's condition, and how they react can have a significant effect on their own as well as their child's mental health.

Objectives: In this study, we aimed to explore the personality traits among mothers of individuals with gender dysphoria in comparison to the mothers of individuals with cis-gender identity by utilizing the Temperament and Character Inventory (TCI) tool.

Methods: We enrolled 27 mothers of GD individuals who had obtained licenses for gender affirmation surgery and 28 mothers of cisgender controls for this case-control study. Personality traits were measured by a validated Farsi version of the Temperament and Character Inventory (TCI) tool.