

Methods Retrospective naturalistic 2 years follow-up study of FEP patients aged 18 to 35 admitted into the department of psychiatry of the Beatriz Angelo's hospital from 2012 to 2014. Data on socio-demographics, clinical characteristics, appointments and medication adherence and readmissions were collected.

Results Between 2012 and 2014 were admitted 56 patients with a FEP into the department of psychiatry of the Beatriz Angelo's hospital. The great majority of the patients (67.9%) disengaged from the treatment, both appointments and medication. Of those, 13.2% did not attend any appointment, 26.3% attended between one and three appointments and 60.5% attended at least 3 appointments before disengaged. About 23% were readmitted between the 2 years follow up period, 15.4% were readmitted more than once.

Conclusions The evidence reviewed indicates that approximately 30% of individuals with FEP disengage from services. Continuity of care is of particular importance with FEP, given evidence suggesting that long-term care can improve symptoms and functioning and reduces relapse risk.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.02.100>

EW0487

Economic aspects in the treatment of schizophrenia in Italy: Cost consequences of an early long-acting injectable anti-psychotics (lais) approach

A. Marcellusi^{1,2,*}, F.S. Mennini¹, R. Brugnoli³, C. Rapinesi³, G.D. Kotzalidis³, S. De Filippis^{3,4}, D. Carrus^{3,5}, A. Ballerini⁶, A. Francomano⁷, G. Ducci⁸, A. Del Casale⁹, P. Girardi³

¹ Università degli studi Tor Vergata, Ceis EEHTA, Roma, Italy

² Consiglio Nazionale delle Ricerche CNR, Istituto di Ricerche sulla Popolazione e le Politiche Sociali IRPPS, Roma, Italy

³ Università La Sapienza, NESMOS Department Neurosciences, Mental Health, and Sensory Organs, Roma, Italy

⁴ Clinic and Hospital, Villa von Siebenthal Neuropsychiatric, Roma, Italy

⁵ ASL, VT, Viterbo, Italy

⁶ University of Florence, Department of Neuroscience, Psychology, Drug Research and Child Health, Firenze, Italy

⁷ University of Palermo, Department of Experimental Biomedicine and Clinical Neuroscience, Palermo, Italy

⁸ DSMASL, Roma1, Roma, Italy

⁹ Fondazione P. Alberto Mileno Onlus, Department of Psychiatric Rehabilitation, Vasto, Italy

* Corresponding author.

Purpose The aim of this analysis was to evaluate the economic consequences of a new treatment approach in the treatment of schizophrenia in the Italian setting. In terms of direct costs, in Italy was estimated that the main driver were represented by hospitalization and residential cost (71% of total direct cost per patient), followed by semi-residential services (13%), anti-psychotic and other drugs (8%) and ambulatory services (8%).

Methods A probabilistic cost consequence model was developed to estimate the potential cost reductions derived from an early treatment with atypical long-acting injectable anti-psychotics (aLAIs) drugs. A systematic literature review was carried out to identify direct and indirect costs associated to the management of schizophrenic patients in Italy. The model projects a scenario analysis in order to estimate potential cost reductions applying a new model management (MoMa) based on patient recovery and early aLAIs treatment.

Results Overall, the total economic burden associated with schizophrenia was estimated at €2.7 billion per year. A total of 50.5% of the economic burden was related to indirect costs and 49.5% to direct costs. Drug costs correspond to 10% of the total

expenditure in terms of direct costs, while hospitalization and residential costs accounts for 81%. Scenario analysis demonstrate a potential cost reduction between 200 million and 300 million based on the effects of MoMa over the reduction of hospitalization and residential costs.

Conclusions This analysis was the first attempt to translate clinical management aspects in economic consequences and will be a useful instruments for decision maker.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.02.101>

EW0488

Insight and social cognition in first episode of psychosis

L. Martínez*, A. Mané, R. Cortizo, I. Cáceres, D. Treen,

L. Galindo, P. Salgado, D. Berge

Hospital del Mar Medical Research Institute IMIM, Psychiatry, Barcelona, Spain

* Corresponding author.

Introduction Impairment of insight in psychotic disorder is associated with adverse impact in treatment compliance, outcome and social functioning although its underlying mechanisms are still unknown. Social cognition and more specifically Theory of mind have been proposed to be correlated to insight. However, the relationship between both factors is still not well defined.

Aims To study the association between social cognition and insight into mental illness in individuals with early psychosis included in the first episode of psychosis program of Hospital del Mar.

Methods From the 94 patients included in the first psychotic episode program between January 2011 and January 2016, thirty-eight patients were evaluated six months after the episode. The three initial items of SUMD (Scale Unawareness of Mental Disorder) were used to measure insight and MSCEIT (Mayer-Salovey-Caruso Emotional Intelligence Test) was used to assess social cognition. Linear correlation analysis by Pearson correlation was conducted.

Results Insight results of SUMD six months after the first episode of psychosis were significantly associated with several subsections of MSCEIT, such as experiential area total punctuation ($r = -0.574$; $P = 0.025$), emotional facilitation section ($r = -0.633$; $P = 0.011$) and the facial emotion perception task ($r = -0.572$; $P = 0.026$).

Conclusions Results suggest an association between insight and emotional perception and facilitation performance in first episode patients, which may suggest a role of social cognition in psychosis insight impairment. Further research to better define the participation of social cognition in insight into psychosis alteration is mandatory to understand the etiology of insight, define treatment targets and consequently improve the disorder prognosis.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.02.102>

EW0489

Results of using micronutrients as adjunctive treatment for psychotic disorders

L. Mehl-Madrona^{1,*}, B. Mainguy²

¹ Eastern Maine Medical Center, Family Medicine Residency, Bangor, USA

² Coyote Institute, Education, Orono, USA

* Corresponding author.

Objective To evaluate the use of micronutrients (minerals and vitamins) as adjunctive therapies for psychosis when added to conventional medications.