

David Horrobin's theory of the psychotic disorders development in predisposed individuals.

Conclusions: Supplementation with polyunsaturated fatty acids may be a chance for a selected group of patients to prolong remission but also hope to prevent the occurrence of psychotic disorders in particularly vulnerable individuals.

Disclosure of Interest: None Declared

EPV1013

Perceived stress and resilience in family caregivers of patients with mental illness : relationship and correlates

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Introduction: Family members play an important role in the life of many adults with mental disorders and are under considerable amounts of stress that may affect caregiver's physical health, quality of life and resilience.

Objectives: The present study aimed to explore the relationship between the perceived stress and the resilience levels among caregivers of patients with mental illness and to identify their associated factors.

Methods: This was a cross-sectional, descriptive and analytical study conducted on caregivers of patients suffering from mental illness. It was conducted in the outpatient psychiatry department at the university hospital of Sfax (Tunisia), during september 2021.

We used the Connor–Davidson Resilience Scale to assess resilience and the Perceived Stress Scale (PSS-10) to assess the level of stress. High scores indicate high resilience and perceived

Results: The sample included 34 family caregivers of patients with mental illness. The mean age was 47.47 years (SD=12.4 years) and the sex ratio (M/F) was 1.42.

The mean resilience score of caregivers was 42.85 and the mean perceived stress score was 24.94 (SD=6.36).

The score of resilience correlated negatively with the score of perceived stress among family caregivers ($r=-0.751$; $p=0.0001$).

The Caregivers with low socioeconomic level were more likely to have a low resilience score ($p=0.004$) and to have high stress levels ($p=0.04$).

The level of perceived stress increased significantly in case of long duration of providing care ($r=0.697$; $p=0.001$), the presence of stressful events ($p=0.029$) and the presence of aggressive behaviors committed by patients ($p=0.001$). However, the level of resilience decreased significantly in those same cases ($p=0.001$; $p=0.002$; $p=0.0001$ respectively)

Conclusions: Our findings suggest that high level of perceived stress among family caregivers impact negatively their capacity of resilience. So, interventions targeting stress related to stressful events and violence committed by patients in their family environment should be integrated to increase the caregivers' resilience.

Disclosure of Interest: None Declared

EPV1014

PALIPERIDONE PALMITATE 6-MONTH FORMULATION FOR THE TREATMENT OF SCHIZOPHRENIA: A 4-MONTH FOLLOW-UP STUDY

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Introduction: Relapse prevention is critical because psychopathology and functionality can worsen in patients with schizophrenia because the repeated episodes and we have strong evidence of antipsychotics efficacy for relapse prevention, but nonadherence rates in patients with schizophrenia are very high, even in comparison with other illness. The literature speaks of average rates of 42% in schizophrenia. For that, long-acting injectable antipsychotics (LAIs) are considered important treatment option, but they are underutilized (Taipale et al. *Schizophrenia Bulletin* 2017; 44, 1381–1387) (Garcia et al. *J Clin Psychopharmacol* 2016; 36(4)355–371). There is extensive clinical trial evidence for the use of paliperidone palmitate 1-month (PP1M) and paliperidone palmitate 3-month (PP3M) formulations for maintaining treatment continuity and preventing relapses and risk of hospitalizations in patients with schizophrenia. (Najarian et al. *Int J Neuropsychopharmacol* 2022; 25(3) 238–251).

Paliperidone palmitate 6-month (PP6M) formulation is a presentation that provides a dosing interval of once every six months. It is the first and only antipsychotic to be administered twice a year.

Objectives: The principal aim of this study was to evaluate the effectiveness, safety, and tolerability of the PP6M in people with non-acute schizophrenia in a naturalistic psychiatric outpatient setting

Methods: Sample: 22 patients diagnosed with schizophrenia (DSM 5 criteria) that started treatment with PP6M after being stabilized with PP1M (N:10) or PP3M (N:12) (the treatment dose was not changed in the four months before study inclusion)

The mean dose of PP6M was 822.727 mg

Bimonthly, the following evaluations were performed during a follow-up period of 4 months:

The Clinical Global Impression-Schizophrenia scale (CGI-SCH)

Treatment adherence, concomitant medication, adverse events and the number of hospitalizations and emergency visits

Efficacy values: Percentage of patients who remained free of admissions at the end of 4months of follow-up.

Other evaluation criteria: Percentage of patients who never visited the emergency department at the end of 4 months of follow-up, average change from baseline visit to the final evaluation as assessed by score obtained on the following scale: GSI-SCH, treatment adherence rate and tolerability.

Results: The percentage of patients who remained free of admissions at the end of the 4 months was 100% and the percentage of patients who never visited the emergency department at the end of 4 months was 100 %

Mean variations from baseline scores at 4 months were: (-0.21 ± 0.31) on the GCI-SCH.

The rate of adherence to treatment with PP6M after 4 months was 100%.

Tolerability was good. None of the patients experienced an adverse event.

Conclusions: In our study, we found that short-term treatment with paliperidone palmitate 6-month formulation is effective and well tolerated in clinical practice conditions

Disclosure of Interest: None Declared

EPV1016

Addressing the factor associated with high rate of admission in a sample of patient with psychosis including the Changes Due to COVID-19 (Telepsychiatry)

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Introduction: Patients with psychosis are particularly more prone to relapse, emergency presentation and subsequent hospital admissions (1). Hospitalization is not only a stressful experience to patients and carers, but also a financial burden to the National Health Service (NHS). Inpatient and community-based mental health services represent 47% of the annual healthcare costs for patients with SMI in the UK (2). The COVID pandemic had profound effects on health care services including the shift to remote consultations (Telepsychiatry) using video and telephone consultations in outpatient clinics. This shift to tele psychiatry was considered a novel challenge to both service users and service providers. We studied the impact of this change in the delivery of care on the number of admissions in patients suffering from psychoses.

Objectives: We aimed at examining the factors associated with higher rates of hospital admissions and the effect of telepsychiatry (changes due to COVID) on the rate of hospital admissions in patients with a psychotic illness.

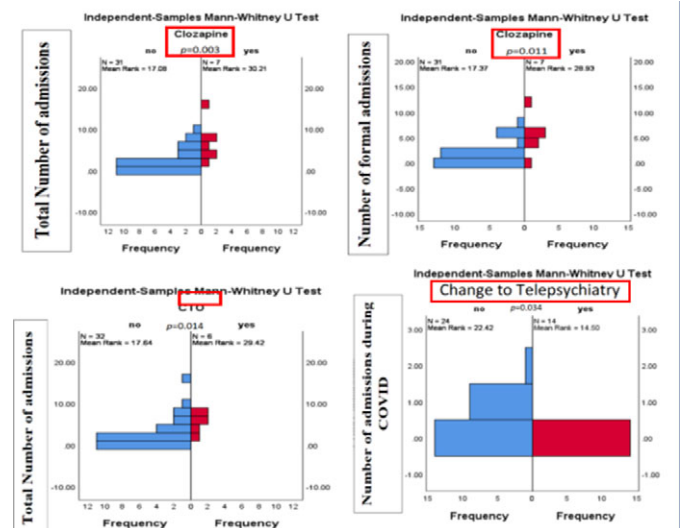
Methods: We reviewed the care plans of forty patients with a diagnosis of a psychotic illness who were randomly selected from two specialist psychosis teams in Essex. We looked into a number of factors to identify their associations with the number of hospital admissions. Moreover, we compared patients who had changes in their care due to COVID-19 with those who received care as usual in terms of the number of admissions in the first year of the pandemic.

Results: Patients who were under CTO or were receiving Clozapine had significantly higher total number of admissions compared to those who were not. The change in the type of care to telephone or

video consultation during COVID-19 was associated with a lesser number of admissions during the first year of the pandemic.

Patients receiving clozapine have higher total number of admissions. This finding might be explained by the severity of illness in this patient group. It could also be linked to the re-initiation policy within EPUT that mandates inpatient initiation and re-initiation of clozapine even in the absence of relapse signs. The shift from classic face-to-face to telephone and video consultation has its well-known shortcomings. However, it does appear to be a suitable alternative to a group of patients that it was associated with lower rates of hospital admission during the height of the pandemic.

Image:



Conclusions: To conclude, the factors that were associated with a higher number of admissions in patients with psychosis were under CTO or receiving treatment with Clozapine. Preliminary evidence showed that telepsychiatry is a suitable alternative to standard care during the COVID-19 pandemic.

Disclosure of Interest: None Declared

EPV1017

A Case Report of Clozapine-induced Symmetrical Drug-Related Intertriginous and Flexural Exanthema with cross-reactivity between Clozapine and Quetiapine

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Introduction: Symmetrical Drug-Related Intertriginous and Flexural Exanthema (SDRIFE) is characterised by a distinctive pattern of erythematous and symmetrical rash over the gluteal and intertriginous regions after exposure to certain systemic medications.