

SD). Our data confirms that patients in the first episode of psychosis present deficits in all cognitive domains. A more rigorous and thorough examination of specific subcomponents of cognitive abilities may be necessary in order to examine possible contributing factors as to specify the exact nature of cognitive deficits in first episode of psychosis.

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#### EW0247

### A longitudinal evaluation of cognitive deficits in patients with first episode of psychosis

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It has been well documented in many studies till now that patients in their first episode of psychosis demonstrate cognitive deficits. However, it is yet to be made clear how these deficits progress. Deterioration, stability or even amelioration in some domains has been noted from researchers. The aim of this study was to examine the longitudinal course of cognitive deficits over time. We administered a comprehensive battery of neuropsychological test to a group of first psychotic episode patients at the acute phase, 6 months and 1 year later. The sample comprised of 25 patients (13 male) in the first episode of psychosis. Specific tests of the Cambridge Neuropsychological Test Automated Battery (CANTAB) were used. The cognitive domains of attention, memory, working memory, visuospatial ability and planning, mental flexibility/shifting were examined. Repeated measures ANOVA was used in order to detect changes in the patients' performance over time. According to our data, there was an improvement from baseline to 6 months in attention, planning and visual working memory. There was no change in performance in these cognitive domains from 6 months to 1 year from baseline. Memory, mental flexibility/shifting and visuospatial memory remained stable over time. Our data suggest variability concerning neuropsychological performance in specific tests examining different domains. Evaluation of cognitive function in the first episode of psychosis needs more thorough and comprehensive research, in relation to its course over time.

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#### EW0248

### The relationship of emotion recognition with neuropsychological performance in patients with first episode psychosis

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The relationship between neuropsychological dysfunction and emotion perception has been frequently noted in various studies. Attention, for example, has been found to play an important role in emotion processing and recognition. Not many studies though, have examined this relationship in first psychotic episode patients. The aim of the present study was to explore the nature of the relation between performance in cognitive tests and a test that

measures emotion perception. In a sample of 46 first psychotic episode patients (22 male), we administered a comprehensive battery of neuropsychological non-verbal tests and an emotion recognition test. The cognitive domains of attention, memory, working memory, visuospatial ability and executive function were examined, by using specific tests of the Cambridge Neuropsychological Test Automated Battery (CANTAB). The emotion recognition assessment comprised a new test that includes 35 coloured pictures of individuals expressing six basic emotions (happiness, sadness, anger, disgust, surprise, fear) and a neutral emotion. We used partial correlation–controlling for the effect of age–and we found a statistically significant relationship between emotion recognition and overall cognitive performance. More specifically, attention, visual memory and visuospatial ability positively correlated with emotion recognition. In regard to specific cognitive domains, attention positively correlated with anger and fear, whereas visual memory correlated with happiness and fear. In conclusion, it seems that the role of underlying visual processes in emotion perception has to be further examined and evaluated in this group of patients.

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#### EW0249

### No effect of cognitive performance on post-intervention improvement in emotion recognition

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Deficits in emotion perception in patients with first episode of psychosis have been reported by many researchers. Till now, training programs have focused mainly in patients with schizophrenia and not in first psychotic episode (FEP) patients. We used a new intervention for facial affect recognition in a group of 35 FEP patients (26 male). The emotion recognition intervention included coloured pictures of individuals expressing six basic emotions (happiness, sadness, anger, disgust, surprise, fear) and a neutral emotion. The patients were trained to detect changes in facial features, according to the emotion displayed. A comprehensive battery of neuropsychological tests was also administered, measuring attention, memory, working memory, visuospatial ability and executive function by using specific tests of the Cambridge Neuropsychological Test Automated Battery (CANTAB). We tried to explore whether cognitive performance can explain the difference noted between the original assessment of emotion recognition and the post-intervention assessment. According to our data, overall cognitive performance did not correlate with post-intervention change in emotion recognition. Specific cognitive domains did not correlate with this change, either. According the above mentioned results, no significant correlation between neuropsychological performance and post-intervention improvement in emotion recognition was noted. This finding may suggest that interventions for emotion recognition may target specific processes that underlie emotion perception and their effect can be independent of general cognitive function.

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