

Objective The work initiated to study gene MDR1 C3435T polymorphism and to assess its association with pharmacoresistance formation in patients with epilepsy receiving antiepileptic drugs (AEDs).

Materials Study involved 89 patients with localization-related epilepsy and 55 unrelated healthy subjects.

Results Distribution of 3435T/C polymorphism in NDR1 gene was analyzed in the patients with the localization-related epilepsy and nominally healthy donors. The distribution of frequencies of gene alleles was found to correspond to the Hardy-Weinberg equilibrium ($P > 0.05$). Incidence of genotypic variants of the polymorphism was as follows, CC was found in 18.6%, CT and TT were observed in 55.9% and 25.4% of cases. In the controls CC was found in 60.0%, CT and TT were observed in 33.3% and 6.6% of cases, respectively. The findings are the evidence for significant effect of functionally weak variants in C3435T polymorphism of MDR1 gene on efficacy of antiepileptic therapy.

Conclusion presence of T-allele of C3435T polymorphism of MDR1 gene increases risk of pharmacoresistance in the patients with epilepsy and is a significant and predicting criterion of efficacy and feasibility of the antiepileptic therapy conducted.

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

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EV1209

Ambientation/acclaculturation of a psychologist as “methodological internship” for developing qualitative research to study clinical supervisions at a psychiatric outpatient service of Brazilian general hospital

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Qualitative research in a psychiatric setting requires methodological updates on its modus operandi for professionals who migrated paradigmatically from other academic areas. The mere adoption of the concept of acculturation, from anthropology to field of health services, may not correspond to specificities of assistance and research in this field.

Objective To discuss results of a certain environment and acculturation strategy for development of humanistic research that took place in a psychiatric outpatient service of a university hospital.

Method Observation of environment of psychiatric supervision for qualitative method in health setting, in period of six months. The first author, doctoral student, psychologist, systematically attended discussions of clinical cases, observing relationship between supervisors and residents. Data were recorded in field diary, followed by free-floating readings and critical analyses. These were also submitted to peer reviewers of the LPCQ-laboratory of clinical-qualitative research.

Results – The experience, similar to an “internship”, has been confirmed as necessary to conduct qualitative research in this field;
– It allowed accurate apprehension of features of environmental functioning and, above all, cultural dimensions of language of participants;
– This proved pertinent for clearing the theme-problem to be researched;
– Postgraduate researchers, in particular those graduates under other paradigms, have strengthened their methodological knowledge on this field, and have been inserted epistemologically for which they will have built new knowledge;

– Finally, this methodological stage improved the so-called active observation and phenomenological listening of the researchers regarding those observed.

Conclusions The experience contributed significantly to establishing and validating the qualitative methodological course.

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e-Poster Viewing: Schizophrenia and other psychotic disorders

EV1210

Psychosis in epilepsy patients

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Introduction Psychosis in patients with epilepsy was known in antiquity and was already described in detail in the nineteenth century.

This kind of psychosis can be categorized in relations to seizures: preictal psychosis (before the seizures), during them (ictal) or after the seizures (postictal psychosis)

Aims Through several cases of patients that were treated in our department with the diagnosis of psychosis, previously or during the treatment diagnosed with epilepsy, we analyse the characteristics and diagnostic criteria of these pathologies.

Methods Systematic literature review in up-to-date and Pubmed, looking for reviews on psychosis and epilepsy, in international scientific journals of neurology and psychiatry.

Conclusions Being able to recognize this several types of psychotic states associated with epilepsy has a clinic and prognosis utility, because made important differences in treatment and in the evolution of the illness.

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EV1211

Family burden in caregivers of schizophrenia patients

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Introduction Schizophrenia is a disabling, chronic psychiatric disorder that has far-reaching consequences for both patients and their relatives. Management of schizophrenia involves family support and care. In this context, burden of care is a concept related to caregivers and family's members of patients assuming responsibility for these patients. This construct can be conceptualized as a syndrome of varying clustering affecting the general and mental health of caregivers.

Objectives This study aims to determine the frequency and clinical correlates of family burden in schizophrenia.

Methods We performed a transversal study in department of psychiatry A at Razi hospital. Thirty principal caregivers of schizophrenia patients were interviewed. Caregiver's burden was assessed using the Zarit scale.

Results The mean age of caregivers was 48.7 ± 7.15 years. In our sample, 63.3% ($n = 19$) were parents, 23.33% ($n = 7$) were brothers

or sisters and 13.33% ($n=4$) were spouses. The mean score of Zarit was 58.75 ± 9.15 . Caregivers had a severe burden in 56.66 of cases ($n=17$). Levels of burden were significantly associated with history of aggressive acting out and poor treatment adherence.

Conclusion Caregivers of schizophrenia patients experience enormous burden which is in part related to clinical features of disease. Further studies are necessary to establish the appropriate interventions in order to reduce and manage general and psychological impact of schizophrenic patients care giving.

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EV1212

Mild depressive symptoms mediate the impact of childhood trauma on long-term functional outcome in early psychosis patients

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Introduction The mechanism linking childhood trauma (CT) to the functional deficits observed in early psychosis (EP) patients is as yet unknown.

Objectives To examine the potential mediating effect of depressive symptoms in this well-established association.

Methods Two hundred nine EP subjects aged 18–35 were assessed for functioning and psychopathology after 2, 6, 12, 18, 24, 30, and 36 months of treatment. Patients were classified into early-trauma if they had faced at least one experience of abuse (physical, sexual, or emotional) or neglect (physical or emotional) before age 12, and late-trauma if the exposure had occurred between ages 12 and 16. Psychopathology was assessed with the Positive and Negative Syndrome Scale and the Montgomery-Asberg Depression Rating Scale. Functioning was measured with the Global Assessment of Functioning (GAF) and the Social and Occupational Functioning Assessment Scale (SOFAS). Mediation analyses were performed in order to study whether the relationship between CT and functioning was mediated by depressive symptoms.

Results When compared with nonexposed patients, early but not late trauma patients showed lower levels of GAF and SOFAS scores over all the time points, excepting after the first assessment. After 30 and 36 months, the effect of early trauma on functioning was completely mediated by depressive symptoms. No mediating effect of positive or negative symptoms was highlighted at those time points.

Conclusion Mild depressive symptoms mediated the impact of early trauma on long-term functional outcome. Intensifying pharmacologic and/or psychotherapeutic treatment, focused on the depressive dimension, may help traumatized EP patients to improve their functioning.

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

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EV1213

Age at the time of exposure to trauma modulates the psychopathological profile and the level of functioning in early psychosis patients: A prospective study

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Introduction Evidence suggests a relationship between exposure to trauma and higher levels of symptoms and poorer functional outcomes in early psychotic patients (EPP). However, the impact of the age at the time of exposure to trauma in this association is as yet unknown.

Objectives To examine the potential differential impact of trauma, according to age at the time of exposure, on the level of functioning and on the psychopathological profile of EPP followed-up prospectively.

Methods Two hundred and fifty-five EPP aged 18–35 were followed-up prospectively over 36 months. Patients who had faced at least one experience of abuse or neglect were classified according to age at the time of first exposure (early-trauma: before age 12; late-trauma: between age 12 and 16), and then compared with unexposed patients (non-trauma). The level of symptoms was assessed using the Positive and Negative Syndrome Scale, the Young Mania Rating Scale, and the Montgomery-Asberg Depression Rating Scale. The level of functioning was assessed with the global assessment of functioning.

Results Comparisons over the 3 years of treatment with non-trauma patients revealed that:

- early-trauma patients showed consistently higher levels of positive ($P=0.006$) depressive ($P=0.001$), manic ($P=0.006$) and negative ($P=0.029$) symptoms and showed poorer functional level ($P=0.025$);

- late-trauma patients only showed more negative symptoms ($P=0.029$) as compared to non-trauma patients.

Conclusions The age at the time of exposure to trauma has a modulating effect on its impact on symptoms and functional outcome in EPP and it should be systematically examined in clinical and experimental settings.

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EV1214

Relationship between brain structural abnormalities and early onset psychotic disorder—case presentation

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Introduction Contemporary structural models of several psychiatric disorders propose abnormalities in the structure and function of distinct neural networks. Clinical observations of affective and cognitive changes arising from cerebellar lesions and stimulation permit the hypothesis that the cerebellum may not be irrelevant in