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EV1186

A pilot early psychosis intervention programme in Bolivia

G. Rivera Arroyo
Hospital Universitario Japonés, Mental Health, Santa Cruz, Bolivia

The problem Less than half of the more than 250 adolescents and young adults who are estimated to experience a first episode of psychosis in the city of Santa Cruz each year are ever diagnosed and receive treatment.
Of those patients who are eventually diagnosed, the average duration of their symptoms of psychosis prior to receiving treatment is estimated to be over 2 years.
The opportunity Multiple psychosocial variables, such as the reaction of patients and their families to symptoms of psychosis, which play a vital role in determining long-term outcomes, demonstrate their highest degree of flexibility during the period of early psychosis. Psychological, social and evidence-based pharmacological interventions undertaken during this time frame can have a profound impact on the life-course of an individual with psychosis.
Our solution We propose to establish a pilot early psychosis intervention program that will provide age appropriate biopsychosocial treatment and support for 15–25 years old with first episode psychosis and their families in Santa Cruz. This will improve short and long-term outcomes for those with psychosis, increase speed of recovery, decrease the need for hospitalization, reduce family disruption and decrease rates of relapse.
By utilizing a mobile, multidisciplinary treatment team that emphasizes the roles of trained case managers focused on providing intensive individual and family support in the home, this program will provide culturally appropriate care that will leverage contributions from a limited supply of psychiatrists and shift dependence away from a fragmented medical system.
Disclosure of interest The author has not supplied his declaration of competing interest.

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EV1187

Impact of vulnerability to stress in the development and course of first psychotic episode

L. Rossini Gajsak[1,*], M. Celic Ruzic[1], M. Rojnic Kuzman[2]
[1] *Neuropsychiatric Hospital Dr. Ivan Barbot, Department of Biological Psychiatry, Popovaca, Croatia*
[2] *University Hospital Centre Zagreb, Department of Psychiatry, Zagreb, Croatia*
* *Corresponding author.*

Introduction The stress diathesis hypothesis is one of the leading models of etiology of psychotic disorders. Cortisol is one of the most researched stress hormone; yet its role in first psychotic episode is currently subject of many researches. Psychotic disorder occurs when "enough" stress attacks vulnerable personality. Stress response activates HPA axis that results in cascade effects on several body systems (immune, neuroendocrine and inflammatory). Dysregulation of the HPA axis and increased cortisol levels have been implicated in psychotic as well as in other psychiatric disorders.
Objective To follow treatment response through changes in clinical status and stress biomarkers evaluation in longitudinal 18 months research in drug naive FEP.
Aim To assess endocrine and autonomic responses to acute psychosocial stress, their associations with onset of the first psychotic episode and their subsequent remission.
Methods We studied 17 subjects with FEP and age and gender matched controls who were exposed to the Trier Social Stress Test. Other materials have explored clinical status through standardized clinical psychiatric interview and validated psychiatry scales as well as measured laboratory biomarkers (cortisol, prolactin, insulin).
Results Our preliminary findings on a sample of 40 participants indicate a differences between patients and controls in terms of response to stress measured by TSST.
Conclusion In our continued longitudinal research, we plan to further explore the role of hypothalamic-pituitary-adrenal activity in onset and course of psychotic disorder and its relation with other biomarkers.
Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV1188

A case of rare allele T 126, 30,32 base pairs in a schizophrenic patient: A study case

A.I. Sabau[1,*], P. Cristina[2], B. Valerica[2], P. Delia Marina[3]
[1] *Vasile Goldi, Western University of Arad, Arad, Romania*
[2] *Vasile Goldi, Western University of Arad, the Institute of Life Science, Arad, Romania*
[3] *Vasile Goldi, Western University of Arad, Psychiatry Department, Emergency County clinical Hospital of Arad, Arad, Romania*
* *Corresponding author.*

Introduction Schizophrenia is a severe and complex disease clinically characterized by disturbed thought processes, delusions, hallucinations and reduced social skills. Gene coding for neregulin 1 (NRG 1) located in 8 p21chromosomeand single nucleotide polymorphism (SNPs) have been identified strongly supporting *NRG1* gene as a susceptibility gene for schizophrenia.
Objective The present preliminary study, determines the relationship between polymorphism nucleotide sites (SNPs2) of *NRG1* gene and schizophrenia.
Aims Identifying rare allele T of neregulin 1 genein schizophrenic patients.
Method We analyzed the polymorphism (SNPs2) of *NRG1* gene in 20 patients recruited from Psychiatry Department of Emergency Clinical Hospital of Arad diagnosed with schizophrenia according to DSM-5-TM and ICD-10 criteria and 10 healthy controls. From all subjects, we obtained 2 mL of peripheral blood samples. Genomic DNA was extracted using the phenol-chloroform method. Genotyping was performed byPCR-based RFLP analysis for all subjects. The obtained PCR product mixture was completely digested with restriction enzyme, separated on SNP1 and SNP2 agarose gel. We present the case of a 31 years old, male, schizophrenic patient with the SNPs2 polymorphism and rare allele T 126.
Results In both groups, common allele G 127 and 60 base pairs was identified but only 2 schizophrenic patients presented rare allele T 126 and 30,32 base pairs.
Conclusions The polymorphism SNPs2 of *NRG1* gene with rare allele T 126 and 30,32 base pairs, may play a role in predisposing an individual to schizophrenia. Further and extended replicating studies with multiple sequencing of *NRG1* gene are necessary.
Keywords Schizophrenia; *Neregulin 1(NRG1)* gene; Allele T 126
Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV1189

Role of specialized hospital units in integrative treatment of first and early course psychosis – 10-year experience of Zagreb first psychosis unit

A. Savic*, D. Ostojic, A. Silic, A. Bacekovic, V. Jukic
University Psychiatric Hospital Vrapce, Department of Diagnostics and Intensive Care, First Psychosis Unit, Zagreb, Croatia
* *Corresponding author.*