EPP0736

Frequency of clinical appointments in subjects with emergent suicidal ideation

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Introduction: Schizophrenia is a psychotic disorder strongly associated with suicidal behaviour up to 20-50 times higher than those in the general population. However, treatments from primary healthcare workers and mental health specialists may improve daily function and increase recovery.
Objectives: Our study aims to investigate if the frequency of interactions with healthcare specialists affects suicidal ideation for patients with schizophrenia.
Methods: 84 patients diagnosed with schizophrenia spectrum disorder were recruited from the Centre of Addiction and Mental Health (CAMH) in Toronto, Canada. Patient medical charts were reviewed to determine the number of therapeutic interactions in two periods: up to three months from baseline, and retrospectively 3 months before baseline.
Results: 19 patients with worsening suicidal ideation had an average of 5.1 more visits following baseline (SD = 6.94), compared to 64 patients with non-emergent SI had 12.0 more visits following baseline (SD = 18.8).
Conclusions: Patients with worsening suicidal ideation had fewer visits from healthcare professionals as compared to those without worsening suicidal ideation. However, further research is necessary to determine the correlation between healthcare visits and suicidal ideation in this population.

EPP0738

Mourning and psychotic disorders: A different way to experience the loss.

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Introduction: We present the case of a 48-year-old female patient diagnosed with schizoaffective disorder whose father passed away recently. The patient was facing an appalling mourning which was expressed in the form of behavior disorder and positive psychotic symptoms. Mourning is a natural reaction to the loss of a loved one which involves an internal world transformation, affecting both images of the self and the perceived environment.
Objectives: To analyse the guidelines for mourning approach in chronic psychotic patients.
Methods: A case report is presented alongside a review of the relevant literature regarding mourning in patients with chronic psychotic conditions.
Results: Accepting the loss, working through disruptive emotions, adjusting to a world without the deceased and finding an enduring connection with the loved one are the four tasks of mourning described by Worden. In our case, the patient was immersed in the first two tasks. Difficulties in accepting the loss, tolerating harmful emotions and establishing new affective links were observed, as well as massive projection of unbearable emotions such as sadness, anger, fear and guilt. The available literature identifies these idiosyncrasies as common in the grief processing in patients with chronic psychotic disorders.
Conclusions: In patients with psychosis, difficulties in symbolization, emotional processing and social bonding could have repercussions in the development of grief. However, these features do not imply a pathologic mourning. Tolerating mourning as a normal reaction in psychotic patients is needed, even if the patient expresses non-typical symptoms such as acute psychosis symptoms, hallucinations or behavior disorder.

EPP0739

Naming ang Comprehension Features in Language of Schizophrenia Adolescents. Nouns and Verbs Task.

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Introduction: Naming and comprehension are standing amog the basic language functions, which allow individuals to realize the communication domain of language. Naming and comprehension imparements are well-studied (Sebastian et al., 2018) in most affected patient groups (for example aphasia patients), but at the same time schizophrenia process may cause it's specific language disorders (Andreasen et al., 1985). Adolescent age is a very sensitive period in the context of beginning of schizophrenia.
Objectives: The purpose of present study was to identify which language imparement (naming or comprehension) is the most affected in adolescent non-psychotic schizophrenia in this age. Also, authors were aimed at the check of selected tool sensitivness to schizophrenia patients
Methods: Subjects of present study were patients with schizophrenia of Moscow psychiatry clinic (n=20, mean age=14,4), subdivided by DS (F20.xx, F21.xx) and syndromes (national Russian psychiatric subdivision inside the DS). All DS and syndromes were additionally qualified by the clinical professional. Following methods were used: medical history analysis (expert diagnosisqualification, syndromic analysis), Test "Quantative Language

Assessment in Aphasia" (QLAA) (Tsvetkova et al., 1981), statistical analysis. QLAA consists from the 4 subtests: naming of objects (NO), actions (NA); comprehension of objects (CO), actions (CA). Answers were quantified by the 3-mark scale (0-0,5-1).

Results: Mean QLAA NO = 14,5; NA = 14,5; CO = 16; CA = 19. Ingroup comparison using U-criteria showed that differences between NO and CA are the most significant (p<0.05). Differences in all other pairs are not so significant.

Conclusions: language comprehension is studied group of adolescent patients with schizophrenia is the most affected language domain

Disclosure: No significant relationships.
Keywords: Naming; comprehension; schizophrénia; Adolescents

EPP0740

Evaluation of the Relationship Between Suicide Behavior and SIRT-1 Gene in Patients with Schizophrenia and Other Psychotic Disorders

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Introduction: Schizophrenia is a mental disorder with a high risk of suicide, which is one of the leading causes of early death in schizophrenia patients.

Objectives: It was aimed to examine the relationship between the SIRT1 gene and suicidal behavior in patients with schizophrenia, to identify specific polymorphisms and to provide individual protective approaches by predicting suicidal behavior.

Methods: 100 patients with schizophrenia were included in our study. The SIRT1 gene was analyzed using the whole exome sequencing method, and 22 SNPs were identified. In addition, participants' socio-demographic, psychiatric history, and suicidal behavior evaluation form data were recorded. A comparison was made between the two groups according to suicidal behavior.

Results: When sociodemographic and psychiatric history of the participants were compared in terms of suicidal behavior, no significant difference was found. SIRT1 gene SNP; rs2236318; (TT genotype), rs10997870 (GG genotype) was associated about 4 times increased risk in suicidal behavior; rs41299232 (CC genotype) 3.7 times; rs7896005 (AA genotype) with 3.4 times also. Although rs201230502 (TC genotype) and rs36107781 (TC genotype) were more common in the group with suicidal behavior, they lost their significance in regression analysis due to the low number of cases.

Conclusions: Our study showed that schizophrenia has many risks that increase suicidal behavior , but clinical and sociodemographic data are insufficient to predict suicidal behavior. Considering the inheritability of the disease and the effect of genetics on behavior, SIRT1 gene SNP; (rs2236318, rs10997870, rs41299232, rs7896005, rs201230502 and rs36107781) genotypes were found to be associated with suicidal behavior in schizophrenia patients.

Disclosure: No significant relationships.
Keywords: schizophrénia; Genetics; Suicide; sirtuin1

EPP0741

The autonomic activity of nightmare sufferers during sleep and emotion-evoking picture viewing

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Introduction: In nightmare disorder, dysfunctional emotion regulation goes along with poor subjective sleep quality, which is characterised by pathophysiological features such as abnormal arousal processes and sympathetic influences. Dysfunctional parasympathetic regulation, especially before and during REM phases, is assumed to alter heart rate (HR) and its variability (HRV) of frequent nightmare recallers.

Objectives: We hypothesised that cardiac variability is attenuated in participants experiencing frequent nightmares as opposed to healthy control subjects during less deep sleep stages and an emotion-evoking picture-rating task.

Methods: Based on the second-nights' polysomnographic recordings of 24 nightmare disordered (NM) and 30 control (CTL) subjects, we examined HRV during pre-REM, REM, post-REM and slow wave sleep periods, separately. Additionally, ECG recordings of wakeful periods such as resting state before sleep onset and an emotional picture-rating task were also analysed.

Results: According to our results, a significant difference was found in the HR of the NM and CTL groups in the nocturnal segments but not during resting wakefulness before sleep onset, suggesting autonomic dysregulation, specifically during sleep in nightmare disorder. However, despite the accelerated HR of NM subjects at night, they did not exhibit lower HRV. Regarding the emotional task, we also found a contrast between the NM and CTL subjects' HR and HRV, which might indicate altered processes of emotion regulation in nightmare disorder, but the two groups' subjective picture ratings did not differ.

Conclusions: In summary, our study suggests that there might be some trait-like autonomic changes during sleep, but also state-like autonomic responses to emotion-evoking pictures in nightmare disorder.

Disclosure: No significant relationships.
Keywords: heart rate variability; emotion regulation; nightmare disorder; parasympathetic regulation

EPP0743

Insomnia as a concerned mental health issue during COVID-19 pandemic: A google trend analysis

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