

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

L. Alameda^{1,*}, G. Philippe², B. Philipp², D. Kim Q.³, C. Philippe²

¹ CHUV, Psychiatry, Psychiatric Liaison Service, Lausanne, Switzerland

² CHUV, Psychiatry, Treatment and Early Intervention in Psychosis Program TIPP, Lausanne, Switzerland

³ CHUV, Psychiatry, Unit for Research in Schizophrenia- Center for Psychiatric Neuroscience, Lausanne, Switzerland

* Corresponding author.

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.

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

L. Alameda^{1,*}, G. Philippe², B. Philipp², D. Kim Q.³, C. Philippe²

¹ CHUV, Psychiatry, Psychiatric Liaison Service, Lausanne, Switzerland

² CHUV, Psychiatry, Treatment and Early Intervention in Psychosis Program TIPP, Lausanne, Switzerland

³ CHUV, Psychiatry, Unit for Research in Schizophrenia, Center for Psychiatric Neuroscience, Lausanne, Switzerland

* Corresponding author.

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

B. Allkoja¹, E. Mitro¹, B. Zenelaj¹, V. Alikaj^{2,*}

¹ University hospital center “Mother Tereza”, Psychiatric service, Neuroscience, Tirana, Albania

² University of Medicine, Faculty of Medicine, Neuroscience, Tirana, Albania

* Corresponding author.

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