

## **P-1200 - ROLE OF COGNITIVE RESERVE ON SEVERITY OF ILLNESS IN PSYCHOSIS: A LONGITUDINAL STUDY**

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**Objectives:** The objective of the present study was to examine the predictive value of clinical and cognitive -including the cognitive reserve (CR) - variables on the severity of the patient's illness at one year of follow-up.

**Methods:** A study was held with 45 patients with first episode psychosis (FEP) from 3 main hospitals in the Basque Country (Spain). All patients underwent cognitive, clinical, and functional assessments at baseline and at 6 months follow-up. The cognitive measures included were: the Stroop test, Vocabulary sub-test from WAIS-III, the WCST, and Trail Making Test. The clinical and functional measures included were: Positive and Negative Syndrome Scale (PANSS), Young Mania Scale, Montgomery-Asberg Depression scale, and CGI (Clinical Global Impression).

**Results:** Six-months follow-up data were available for 29 patients. Regression analysis was performed with the 6-month follow-up CGI measure as a dependent variable. Results showed that after controlling for CGI at baseline, -PANSS Negative Symptoms Scale ( $B = 0.47$ ,  $p \leq .05$ ) and the CR measure -Vocabulary from WAIS-III- ( $B = 0.36$ ,  $p \leq .05$ ) were the only two which significantly predicted severity of illness after 6 months ( $R^2 = 0.44$ ) and remained significant when CGI at base line was controlled in the regression analysis. The rest variables did not reach statistical significance.

**Conclusions:** These findings emphasize that CR have a role on outcome in first episode psychosis, and enhance that exist a relation between cognition and clinical measures in psychosis.

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