P02-72 - CLINICAL ASSESSMENT OF COMPETENCE TO CONSENT TO SEXUAL ACTIVITY IN BIPOLAR DISORDER AND SCHIZOPHRENIC SPECTRUM DISORDERS. A PRELIMINARY STUDY

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Objectives: To develop a clinician-oriented semi-structured interview for the assessment of sexual consent: the *Sexual Consent Competency Assessment Scale* (SCAS). To assess sexual consent competence in a sample of hospitalized patients, affected by bipolar disorder (BD) and schizophrenic spectrum disorders (SSD, schizophrenia or schizoaffective disorder).

Methods: Patients were recruited at the Psychiatric ward of S. Spirito Hospital, Rome and diagnosed according to DSM-IV-TR criteria. The SCAS items were derived and adapted from Kennedy *et al.* (Am J Ment Retard 2001;106:503-510). The scale items were directly rated by 2 independent clinicians, on a 3-point Likert Scale corresponding to 3 possible outcomes: capable, marginally capable or incapable. Internal consistency, test-retest and inter rater-reliability were good. Principal component factor analysis (PCA) with varimax rotation was applied.

Results: Fifty-four BD patients (51.9% females) and 31 SSD patients (71.0% females) were recruited (mean age, years: 38.1±13.4; 38.4±9.7 respectively; p=0.91). BD patients had better sexual consent competence compared to SSD, there were no gender differences. Cognitive functioning as measured by the Raven Progressive Matrices appeared to moderate the relationship between diagnostic group and sexual consent decisional capacity, with better scores corresponding to higher competence. PCA revealed two interpretable factors 1) cognitive-emotional and 2) consequences-prevention. There were no significant group differences between BP and SSD in the second factor.

Conclusion: The SCAS proved good psychometric validity and reliability. Patients with bipolar disorder showed better sexual consent competence compared to schizophrenic spectrum disorders.