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.

Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1541

EV1212

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

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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.

Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1542

EV1213

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

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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.

Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1543

EV1214

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

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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

some neuropsychiatric states. There is evidence that patients with schizophrenia have altered corticocerebellar connectivity.

Objectives To evidence a case with early onset psychosis accompanied with brain structural abnormalities.

Method Case description.

Results The patient is 15 years old girl with an acute psychotic episode. For more than two months she had demonstrated odd behavior, getting around all the time purposelessly, abandoned school etc. She presented with disorders of perceptions, disorganized speech, insomnia and fluctuations in her mood and behavior. In her brain, MRI was found vermian atrophy, and CT was found hypocampal glyosis and dilatation of temporal corn.

Conclusions Although the structural mapping studies have been equivocal, the weight of evidence supports extending the study of cerebellar activity in schizophrenia. For example, the finding that unaffected first-degree relatives of probands with schizophrenia have reduced cerebellar volumes, along with the observation of reduced cerebellar volumes in neurolepticnaïve patients with schizophrenia, suggests that cerebellar atrophy may be a hereditary trait rather than a psychotropic associated epiphenomenon.

Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1544

EV1215

Traumatic brain injury as psychosis development factor

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Introduction The pathophysiology of psychosis is not fully discovered yet. However, during the last years many different risk factors are shown to prove to have a strong influence within the development of this pathology. Traumatic brain injury (TBI) is one of them.

Objectives Show TBI as a psychosis development risk factor.

Methods Case report. A clinical vignette is presented followed by the results obtained in a bibliographic review.

Results A young 19-year old immigrant man, who lives with his parents in a social exclusion situation is brought to the hospital after having been observed making estrange religious rituals within a local river. During the anamnese he declares that God is "getting in touch with him" while he shows to be changed, with suspicion about being pursued. He also reveals to have suffered a mild-severe TBI with 8 years, having right ear audition problems since then. During the hospitalization some medical test were done, such as MRI, showing the lack of the inner right ear, as well as white matter abnormalities in his right hemisphere, which could be consequence of the TBI. Those findings make us think that this pathology might have been influenced, within other factors, by the traumatic brain injury.

Conclusions This bibliographic review shows that traumatic brain injury may increase the risk of developing psychosis up to 65% from healthy controls, with a medium gap of 3.3 years between the TBI and the appearance of psychotic pathology.

Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1545

EV1216

Psychosis and creativity. Genetic and structural relation between them

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Introduction Madness and creativity are thought to be related from ancient ages. Nowadays, thanks to new scientific developments and researches we are able to identify common genetic and brain patterns between creativity and psychosis.

Objectives Taking the inspiration of a psychotic patient with some shocking drawings, we want to get deep into the actual knowledge about the relation between creativity and psychosis.

Methods Case report and bibliographic review.

Results A 19-year-old man was brought to the hospital after having been found making strange rituals in the public way. In the anamnese he showed to have experienced mystic delusions and hallucinations. He made some particularly creative drawings.

We made a review which showed that this patients may have a diminished latent inhibition, which could make them experiencing usual live irrelevant stimuli as something very exciting and creative at the same time. Genome wide association studies show also that people having creative jobs and psychotic patients share some genes, which could be linked to this abnormal latent inhibition.

Conclusions Latent inhibition abnormalities could be related with psychosis and creativity. There are differences within the course of people having this oversensibility, which could be explained due to the presence of protective and risk factors.

Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1546

EV1217

A fine line between schizophrenia and Hashimoto encephalopathy

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Introduction Hashimoto encephalopathy (HE) is an uncommon syndrome associated with Hashimoto thyroiditis. The relationship between these entities is unclear. Even being rare, it appears to be underrecognized.

Objectives Report a case of an atypical presentation of psychosis in a patient with elevated serum levels of antithyroid antibodies and review the literature about similar situations.

Methods Access clinical process, research PubMed, using the mesh terms "Hashimoto encephalopathy" and "psychosis".

Results A 21-year-old Portuguese female was conducted by authorities to our emergency department after she called for help and was spotted walking barefoot on the streets. Throughout clinical course she presented persecutory ideas, thought blocks, auditory hallucinations, soliloquies, perplexity, total insomnia, bizarre behaviors like coprophagia, trichotillomania and self-injured burns. After some tests, it was found that the patient had high serum levels of antithyroid peroxidase antibody (TPO) and antithyroglobulin antibody (TGO) and reduced folic acid, without other changes. Trials with corticosteroids showed clinical improvement for short periods, as with antipsychotics. No consistent remission was achieved with either approaches.

Conclusion HE is an uncommon syndrome presenting with high titers of antithyroid antibodies that may preconize an acute state of atypical psychosis. Usually, it responds to corticosteroids and so, has a generally good prognosis when treated accordingly. Evidence