

and relation of these differences to the metabolic and inflammatory bases of psychosis are not clear yet.

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#### EW0235

### Long-term rates of remission and late psychotic transition of individuals at risk for psychosis

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**Introduction** In the growing research field of early psychosis detection in patients with an at risk mental state (ARMS), most studies focus on the transition to frank psychosis. However, the majority of ARMS patients do not go on to develop frank psychosis and reported transition rates are declining. Little is known about the long-term outcome of these non-transitioned patients (ARMS-NT).

**Objectives** To investigate in preliminary analyses the long-term outcome of ARMS-NT patients with respect to persistence of ARMS signs and symptoms and the rates of late psychotic transition.

**Methods** The ongoing study “FePsy-BHS-NT” follows up ARMS-NT without transition during at least the first two years for up to 15 years after their initial assessment. ARMS status is ascertained with the Basel Screening Instrument for Psychosis (BSIP). ARMS remission is defined as the absence of attenuated psychotic symptoms or brief limited intermittent psychotic symptoms for at least 12 consecutive months.

**Results** In this preliminary sample of 51 ARMS-NT, the majority of patients (70.6%) have remitted from their at risk mental state, 13.7% remain at risk and 15.7% have made a late psychotic transition during the course of long-term follow up (median = 5.75, range 4–11 years after initial assessment).

**Conclusions** The considerable rates of ARMS persistence and late psychotic transition indicate that longer follow-up durations than commonly recommended should be contemplated in ARMS patients. Potential predictors of favorable long-term clinical outcome, as well as psychosocial, neurocognitive and other outcomes of ARMS-NT patients will be further evaluated in the present study.

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#### EW0236

### Acute psychotic disorders: Factors related to schizophrenia evolution

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**Introduction** Acute psychotic disorders are described as a clinical syndrome characterized by Acuteness of the installation, the intensity and the polymorphism of delirium.

**Aim** Describe the demographic characteristics of a population of patients with an acute psychotic disorder and identify factors correlated with evolution to schizophrenia.

**Methods** This is a retrospective, descriptive and analytic study conducted on hospitalized patients in psychiatric department EPS Mahdia for acute psychotic disorder according to DSM-VI-TR criteria. A study of the recurrence time was performed by Kaplan–Meier and Cox test was used to identify factors correlated with evolution to schizophrenia.

**Results** One hundred and eleven patients were collected. The average age of the study population was 27 years, a male predominance was noted (59.5%), 39.6% of patients had family history of psychiatric disorders, including schizophrenic disorders and bipolar disorder were the most common with rates of 63.6 and 18.4% of cases. For our patients, 38.7% progressed to schizophrenia. Four risk factors were significantly predictive of progression to schizophrenia: male gender ( $P=0.026$ ), subacute or progressive onset disorders ( $P=0.003$ ), partial remission of the disorder ( $P=0.023$ ) and the prolonged duration of untreated psychosis ( $P=0.027$ ).

**Conclusion** The evolution of an acute psychotic disorder remains unpredictable. In fact, the severity is related to the risk of developing schizophrenia or mood disorder. Attention is paid in recent years to recognize and seek most precociously as possible factors associated with this evolution.

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#### EW0237

### Acute psychotic disorder: Which future?

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**Introduction** At present, in absence of reliable clinical and evolutionary data, it is difficult to determine what the consequences of an acute psychotic disorder, specifically if it is a mode of entry into schizophrenia, a mood disorder or a short-lived episode.

**Aim** The objective of this study was to describe the sociodemographic characteristics and evolutionary modalities of a population of patients with a first psychotic episode.

**Methods** This is a retrospective descriptive study, which involved patients admitted to psychiatric ward EPS Mahdia for acute psychotic disorder according to DSM-VI-TR criteria. Data collection was conducted from archived observations and through a pre-determined sheet.

**Results** One hundred and eleven patients were collected. The average age of the study population was 27 years, a male predominance was noted (59.5%), 52.3% were from urban, 73% of patients were single, 33.3% were from a consanguineous marriage. Among those patients with a first acute psychotic episode, 43 patients (38.7%) progressed to schizophrenia, 15.3% to bipolar disorder, 23, 4% to recovery while 22.5% were lost view.

**Conclusion** The long-term evolution of an acute psychotic disorder remains unpredictable. In fact, the severity is related primarily to the risk of developing a schizophrenic disorder or a mood disorder. In this context, attention is paid in recent years to recognize and seek the earliest possible factors associated with this development.

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