EW0814

Efficacy of F17464, a new preferential D3 antagonist in a placebo-controlled phase 2 study of patients with an acute exacerbation of schizophrenia

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Introduction F17464 is a new highly potent preferential D3 antagonist, 5-HT1A and weak D2 partial agonist, with confirmed antipsychotic-like activity in animal models. In healthy volunteers, F17464 had a good safety and tolerability profile. A PET-scan study determined a high D3 occupancy rate up to 22 h after a single dose.
Objectives The primary objective was to evaluate the efficacy of 40 mg/day of oral F17464 in comparison to placebo.
Methods This double-blind, parallel group, multicenter study included patients with acute exacerbation of schizophrenia treated for 6 weeks as antipsychotic monotherapy. Patients were hospitalised for the first 3 weeks of treatment, then continued as outpatients.
Results The 144 randomized patients had a baseline PANSS mean (SD) total score was 89.6 (9.5). The change from baseline of PANSS total score to Day 43 on the FAS (LOCF), showed a statistically significant difference in favor of F17464 over placebo: adjusted mean (SE) change −13.5 (2.1) on F17464 and −7.8 (2.2) on placebo with a treatment effect estimate −5.7 (2.7). The 20% or 30% response rate was statistically higher in the F17464 group (47.2% and 25.0%) compared to the placebo group (30.6% and 13.9%). The incidence of treatment-emergent adverse events was slightly higher in the F17464 group (70.8%) than in the placebo group (62.5%). There were no clinically-relevant hepatic, metabolic, or cardiovascular abnormalities. No EPS was reported under F17464.
Conclusion This is the first D3 antagonist that proves efficacy. The results of this phase 2 study also demonstrate the favorable safety profile of F17674 when compared to placebo.
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Stigma in early detection of psychosis: Subjective experiences of those concerned

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Introduction Despite the large scientific debate concerning potentially stigmatizing effects of informing an individual about being in an at-risk mental state (ARMS) for psychosis, studies investigating this topic are rare and quantitative assessment of this kind of stigmatization does not exist so far.
Objectives This study presents first results regarding potentially helpful or stigmatizing effects of being informed about an ARMS assessed with a newly developed quantitative self-rating (FePsy-Stigma questionnaire).
Methods Forty ARMS patients participating in the prospective Basel Early Detection of Psychosis (FePsy) study as well as patients clinically assessed in the early detection service of the Psychiatric Services of Solothurn, completed the FePsy-Stigma questionnaire during their follow-up assessments at least six months after they had been informed about their increased risk of developing psychosis. The questionnaire was constructed based on a previous qualitative study and on adapted versions of formerly used instruments for assessing stigma in mental health (Internalized Stigma of Mental Illness Scale, Personal Beliefs and Experiences Questionnaire).
Results Stigmatization appeared to be low overall except for social withdrawal due to suspected stigma. Stigma resistance, stereotype awareness and expected discrimination scored considerably higher than actually experienced discrimination, alienation and stereotype endorsement.
Conclusions The results suggest that early detection services help individuals cope with symptoms and build certain resilience toward potential stigmatization, rather than enhancing or causing the latter. In line with previous studies, our results indicate that there is a considerable difference between expected and actually experienced discrimination as well as between stereotype awareness and stereotype endorsement.
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Sex-specific effect of intranasal vasopressin, but not oxytocin, on emotional recognition and perception in schizophrenia patients

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Background Impairments in social behavior and cognition, such as the ability to identify others' emotional state, are important features in schizophrenia. Arginine vasopressin (AVP) and oxytocin (OXT) and are nonapeptides that influence social cognition and behavior. Previous studies have shown that the administration of intranasal AVP or OXT may affect the ability to recognize facial emotions. The primary objective of this study was to investigate the effects of a single dose of AVP or OXT on social cognition in patients with schizophrenia. The secondary objective of the study was to test for sex-specific effects of intranasal AVP and OXT administration on social cognition.
Methods In this double-blind, placebo-control, cross-over study, 34 patients diagnosed with schizophrenia or schizo-affective disorder, received a dose of AVP, OXT or placebo in three separate meetings. Forty-five minutes after administration, subjects performed facial emotion recognition tasks.
Results There were no significant main effects of hormone administration on the ability to recognize facial emotions between treatment conditions. However, AVP administration resulted in sex-specific differences in emotion recognition. Specifically, in men, AVP administration reduced the ability to recognize angry faces. In women, AVP administration reduced the ability to recognize sad faces and improved the ability to recognize fearful faces.
Conclusions These findings indicate that intranasal AVP may affect the recognition of facial emotions differently in men and