Methods: A total of 103 patients with a diagnosis of Schizophrenia (according to ICD-10) participated in the study. The socio demographic characteristics were recorded and the following psychometric tools were used: NEO- Five Factor Inventory, Connor-Davidson Resilience Scale (CD-RISC25), Multidimensional Scale of Perceived Social Support, Multidimensional Scale of Perceived Social Support (MSPSS), Positive and Negative Syndrome Scale (PANSS), Global Assessment of Functioning scale (GAF).All instruments were adapted to greek population. All statistical analysis was performed using SPSS v.25.
Results: The median length of hospital stay was 40,7 days. The number of previous admissions (p=0,010), the type of admission (compulsory or voluntary) (p=0,017), the physical restrain (p=0,043), the duration of restrain (p=0,002) as well as the existence of social support networks and in particular social support from friends (p=0,018), seem to affect the duration of hospitalization.
Conclusions: The present study underlines the signification of the psychosocial factors that could contribute to the prediction of longer hospitals stays, the planning of appropriate interventions and as a result the reduction of hospital costs.

Keywords: Duration of hospitalization; psychosis; schizophrénia

EPP1229

The correlation between first words appearance and productive speech in adolescents with schizophrenia

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Introduction: Shown that there is connection between early development and the current speech parameters in adolescents with schizophrenia. With a more pronounced lag in speech, there was a decrease in the actualization of speech semantic links.
Objectives: Present work aims for a more detailed analysis of the correlations between early speech development and the actual level of development of speech activity in adolescents with schizophrenia.
Methods: Sample

Age	12,2 - 18,2 (SD=1,35)
males	17
females	13
DS	F20.xx, F21.xx, F25.xx, F06.xx, F32.xx, F33.xx, F50.xx.

Analysis of medical records (medical history) “Syllabic Test”. Parameters: Standard Ratio (SR, SR_2, SR_3); Response Time (RT, RT_2, RT_3). The correlation between the indicators measured by the Spearman correlation coefficient (r_s).
Results: There was no statistically significant correlation between the First Words (FW) and SR: r_s = -0.031, p> 0.05.FW and SR_2 (r_s = -0.004, p> 0.05), FW and SR_3 (r_s = 0.107, p> 0.05). In addition, statistically significant correlation did not revealed between FW and RT: FW and RT (r_s = 0.067, p>0.05), FW and RT_2 (r_s = 0.041, p>0.05), FW and RT_3 (r_s = 0.066, p>0.05).
Conclusions: The results obtained on the Syllabic test in adolescent sample correspond to the previously identified indicators in adult patients with schizophrenia. RT tends to increase with an increase in the FW age. The limitations of present study: the lack of objectivity in medical history data (mainly parents interview), small sample size and large heterogeneity of DS of patients.

Keywords: speech; schizophrénia; early development; adolescents

EPP1230

Clozapine-induced parotitis: A case study

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Introduction: Clozapine is the drug of choice for patients with an unsatisfactory response to classic antipsychotic treatment. Little is known about the involvement of clozapine in the development of parotid disease.
Objectives: Identify the clinical characteristics of Clozapine-induced parotitis through a case and literature review.
Methods: We report the case of a patient with a refractory schizoaffective disorder, bipolar type and who developed recurrent parotitis while taking clozapine. We conducted a literature review based on a PubMed search of articles published on this subject with the following keywords: ‘parotitis clozapine’.
Results: Miss W., 34 years old, suffers from a severe schizoaffective disorder that has been diagnosed for several years. She has received various psychotropic medications. She suffered from frequent relapses that required recurrent hospital admissions. One year ago, a diagnosis of treatment-resistant schizoaffective disorder was made. The decision to introduce clozapine, associated with mood stabilizer treatment, was made on the basis of her treatment refractory symptoms. She experienced considerable sialorrhea after beginning clozapine treatment. Miss W. developed bilateral recurrent swelling over both temporal-mandibular areas after 6 months of treatment. It often appears after eating and lasts from 4 to 6 hours. There was no change in white blood cell count and she was afebrile. An otolaryngologist was consulted and a diagnosis of clozapine-induced parotitis was suggested. A spasmolytic and an anticholinergic treatment were prescribed and clozapine was continued.
Conclusions: This iatrogenic effect of clozapine must be recognized by clinicians in order to be better prevented.

Keywords: clozapine; induced; parotitis; swelling

EPP1231

Follie a deux: Psychopathology in a pandemic

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