Results: Relative to controls, FEP subjects showed volume reduction in a cluster located in the anterior CC genu (Z=3.77, p<0.001 uncorrected), which retained significance when analyses were restricted to the schizophrenia/schizophreniform subgroup (n=62) compared to controls (Z=3.16, p<0.001 uncorrected). In the subsample of FEP subjects who performed the finger localization task, there were two clusters of significant positive correlation between performance on the CFLT and CC volumes, respectively in the anterior genu (Z=3.77, p<0.001 uncorrected) and the posterior genu (Z=3.30, p<0.001 uncorrected).

Conclusion: These findings indicate the presence of circumscribed foci of reduced CC volumes in association with FEP, and suggest that such abnormalities are related to deficits in interhemispheric transfer of information.

P093

Does the legal status affect the outcome of inpatients with schizophrenia?

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Background and aims: Patients suffering from psychotic disorders are the most common to be admitted to psychiatry departments and treated against their will. All patients in this study were included in the international project EUNOMIA, which is focused on the contemporary use of coercive measures in psychiatry. The purpose of this study was to compare the voluntary and involuntary admitted patients, measured as improvement of psychopathology and social functioning.

Methods: 120 involuntary and 18 voluntary patients, who met the criteria for an F2 disorder and subjective felt coercion at the admission measured by the McArthur Scale were included. They were assesed three times, in the first week and at the end of first and third month after admission with Brief Psychiatric Rating Scale - BPRS and Global Assessment of Functioning - GAF Scale. Outcome was defined as a change in the total BPRS and GAF scores between first and third observation.

Results: There was no significant difference in the total BPRS (voluntary T1 48.6±13.3, T3 35.5±10.2, and involuntary T1 50.5±12.8, T3 32.2±8.6) or GAF (voluntary T1 38.1±14.7, T3 63.6±10.3 and involuntary T1 29.8±12.8, T3 63.6±17.1) changes, (p<0,05). In the lenght of stay both groups significantly differ, voluntary 30.8±15.9 resp. involuntary 51.5±51.6 days.

Conclusions: Inpatients with schizophrenia who were treated involuntary, improved at the same level as the voluntary ones, however the lenght of hospital stay was shorter by voluntary patients.

P094

The frontal assessment battery (FAB) compared to the stroop test in schizophrenia

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Background and aims: Frontal lobe dysfunction has been considered as a core feature in schizophrenia. To the evaluation of this impairment, time-consuming neuropsychological batteries are needed. Recently, Dubois et al (2000) reported a short battery for assessing frontal lobe function in patients with neurological disorders. To evaluate the clinical efficacy of this frontal assessment battery (FAB) in patients with schizophrenia, we performed both FAB and Stroop Color Word Test (SCWT), which is suggested to be a representative task of executive function.

Methods: 24 schizophrenic patients and 30 sex and age-matched controls were included. FAB, SCWT and Mini Mental State Examination (MMSE) were performed in both groups. The FAB scores were compared with the performance in SCWT and correlated with education level, age and duration of disease. No difference in the MMSE scores between two groups was found.

Results: The FAB global score was significantly lower in the schizophrenia group compared to controls. In the patients group, the conceptualization and the inhibitory control subscores were negatively correlated with mistakes in color-naming task. The FAB total score, the mental flexibility and the programming subscores were negatively correlated with latencies in color-naming, color-reading and in color-word interference task of SCWT. Negative correlation between the FAB scores and the age and duration of disease was also evident.

Conclusion: The FAB is likely to be a useful and brief battery for assessing frontal lobe function in schizophrenia, as it results from the comparison with SCWT.

P095

The frontal assessment battery at bedside (FAB) in patients with schizophrenia

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Background and aims: Frontal lobe deficits have often been reported in patients with schizophrenia. Recently, Dubois et al (2000) reported a short bedside cognitive and behavioral battery for assessing frontal lobe function in patients with neurological disorders. We hypothesized that cognitive functions of frontal lobe in schizophrenia could be evaluated with this battery.

Methods: 27 patients with schizophrenia and 30 sex and age-matched controls were included. We performed FAB and Mini Mental State Examination (MMSE) in both groups and we correlated the scores of six subtests and the total FAB score with handedness, education level, age and duration of disease.

Results: The FAB global score was significantly lower in the schizophrenia group compared to controls. There was negative correlation between the FAB scores and their age and duration of disease in the schizophrenia patients. Correlation between FAB scores and MMSE scores was evident in both groups.

Conclusion: The FAB is likely to be a useful and brief battery for assessing frontal lobe function in schizophrenia patients.

P096

Stroop color word test performance in first episode and chronic psychotic patients

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