## EPV1317

## The effect of intranasal oxytocin application and mindfulness-based group therapy for patients with schizophrenia spectrum disorders – A study protocol

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**Introduction:** Research indicates improvements in negative symptoms and empathy for schizophrenia spectrum disorders (SSD) after mindfulness-based interventions (MBI). Current treatment approaches for SSD remain limited regarding their effectiveness on negative symptoms and sociocognitive deficits. After oxytocin (OXT) administration, especially in a positive social context, an increase in empathy could be shown. The effect of mindfulness in combination with OXT has not yet been examined.
**Objectives:** This study investigates the additional effect of OXT administration combined with MBI on empathy and negative symptoms in patients with SSD.
**Methods:** An experimental, randomised, triple-blinded, placebo-controlled study is proposed. Based on power calculations, 140 participants with SSD will be recruited at Charité – Universitätsmedizin Berlin. A dose of intranasal oxytocin with 24 I.U. or placebo will be administered 45 minutes before each session. Following each administration, a total of four MBI interventions will take place for two weeks. Empathy as primary outcome will be measured using validated psychometric questionnaires. Outcomes, including negative symptoms and OXT plasma levels, will be measured at baseline and post-intervention. A 2x2 mixed-model ANCOVA design with time as within- and group as between-subject factor will be calculated to assess empathy and negative symptom changes.
**Results:** The study hypothesises that applying intranasal oxytocin in combination with MBI will increase empathy and reduce negative symptoms in patients with SSD.
**Conclusions:** Findings could provide insight into enhancing therapies like MBI by utilising OXT as a possible supplementary treatment option. Findings could therefore pave the way for a personalised psychiatric medicine treatment for individuals with SSD.

**Disclosure:** No significant relationships.
**Keywords:** Mindfulness; schizophrénia; Oxytocin; negative symptoms

## EPV1316

## Differences in physical activity in subjects with psychosis versus a control group

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**Introduction:** Psychiatric illnesses are related with a reduced life expectancy and an increase of mortality rates (around 60%) mainly associated with cardiovascular diseases [1]. The high prevalence of obesity, metabolic syndrome, diabetes mellitus and tobacco use among these patients undoubtelly predispose to the impairment in physical health and mortaility increase. Regular physical activity in the general population is associated with a decrease in cardiovascular risk but litle is know about iss influence in some chronic and severe mental disorders like schizophrenia [2].
**Objectives:** To quantify the physical activity performed by a sample of subjects with psychosis, borth males and female, compared to a control group.
**Methods:** A sample composed of 141 patients with schizoprenia was compared to 103 healthy subjects as a control group. The International Physical Activity Questionnaire - Short Form (IPAQ) scale was applied to all participants. The time (minutes) of physical activity performed in a week (METs) was collected by each participant [3].
**Results:** The differences in the total physical activity Mets for the patients with schizophrenia were highly significant ($p = 0.001$), showing a lower degree of physical activity compared to the control group. A higher and significant percentage of sedentary lifestyle among the psychiatric group (64.5%), compared to 35.5% in the control group was found.
**Conclusions:** The group of pateints with Schizophrenia showed a significant higher sedentary lifestile including less physical activity. This finding could be highly related with a higher risk of cardiovascular disease and deterioration of the physical health.

**Disclosure:** No significant relationships.
**Keywords:** schizophrénia; Physical exercize; Psychosis; physical health

## EPV1317

## Language and turn-taking in schizophrenia spectrum disorders

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**Introduction:** Language and conversation are deeply interrelated: language is acquired, structured, practiced in social interactions and linguistic resources (specifically syntactic, prosodic and pragmatic