Results: After application of the screening process, 215 articles were included for data-analysis. One group of markers were consistently elevated (p<0·05) in both acute and chronic SSD, relative to healthy controls; this group comprised interleukin (IL)-1β, IL-1 receptor antagonist (IL-1RA), soluble interleukin-2 receptor (sIL-2R), IL-6, IL-8, IL-10, tumor necrosis factor (TNF)-α, and high sensitivity C-reactive protein (hsCRP). A second group of markers were inconsistently altered between illness stages: IL-2 and interferon (IFN)-γ were significantly elevated (p<0·05) in acute SSD, whilst IL-4, IL-12 and IFN-γ were significantly decreased (p<0·05) in chronic SSD.
Conclusions: These results indicate that a baseline level of inflammatory protein alteration occurs in SSD throughout the course of illness. This was evident from the group of markers that were consistently elevated in acute and chronic SSD (e.g., IL-6), representing possible trait markers. Moreover, superimposed immune activity may occur in acute SSD, given the group of possible state markers that were increased only in acute illness (e.g., IFN-γ). Further research is required to elucidate whether these peripheral changes are reflected within the central nervous system.

Disclosure of Interest: None Declared

EPP0756

Clinical experiences with 6-monthly paliperidone palmitate after 12 months of use. A retrospective study

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Introduction: Long-acting injectable antipsychotics (LAIA) have provided a significant improvement in the treatment of schizophrenia. Although there is already significant clinical experience with paliperidone palmitate, it is important to evaluate the clinical response of patients to this new 6-monthly presentation, so descriptive studies based on real clinical evidence can be very useful for this purpose.
Objectives: The main objective of the study is to describe the use of 6-monthly paliperidone palmitate in routine clinical practice, providing variables that objectify the evolution such as the number of admissions and visits to the emergency room.
Methods: Retrospective descriptive study with a sample selected by non-probabilistic consecutive sampling, retrospective type, in a time interval of 12 months (n=40). The patients selected were all those who received 6-monthly paliperidone palmitate treatment, with a diagnosis of schizophrenia, in 12 months of use at Hospital Universitario Infanta Elena. A descriptive analysis was performed. Mean and standard deviation were calculated for quantitative variables and N and percentage for categorical variables.
Results: A total of 40 administrations of 6-monthly paliperidone palmitate were performed in the study. None of the patients presented adverse reactions related to the administration of the drug, not reporting local pain or inflammation of the puncture area, except for the characteristic discomfort of an intramuscular puncture. Regarding the efficacy of 6-monthly paliperidone palmitate, none of the patients presented a psychotic decompensation after its administration, maintaining psychopathological stability after the change. The switch to 6-monthly paliperidone palmitate was made from both 1-monthly paliperidone palmitate and 3-monthly paliperidone palmitate, both showing the same efficacy. Regarding tolerability, all the patients who were administered 6-monthly paliperidone palmitate were previously treated with the monthly and quarterly presentation of the same molecule, having presented good tolerability to it, maintaining said tolerability after treatment. change to 6-monthly paliperidone palmitate, with no adverse reaction being recorded after the change. The adherence presented by the patients was very good, performing 100% of the administrations of 6-monthly paliperidone palmitate
Conclusions: 6-monthly paliperidone palmitate may be an effective and well-tolerated treatment for the treatment of schizophrenia. In the present study, the use of said LAIA in a group of 40 patients is objectified, showing excellent efficacy and tolerability. All study patients were already stable with the 1-monthly and 3-monthly paliperidone palmitate formulations, maintaining said psychopathological stability when switching to the 6-monthly paliperidone palmitate formulation, with excellent adherence and adverse effect profile .

Disclosure of Interest: None Declared

EPP0757

Alternative initiations with 6-monthly paliperidone palmitate. A retrospective study

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Introduction: 6-monthly paliperidone palmitate features an initiation regimen through 1-monthly paliperidone palmitate or 3-monthly paliperidone palmitate. Some patients do not have sufficient adherence to treatment and it is necessary at the clinical level to start directly with 6-monthly paliperidone palmitate. There is little clinical experience with these alternative initiations and through this work those that have been carried out for 12 months at the Hospital Universitario Infanta Elena are exposed.
Objectives: The main objective of the study is to describe the alternative initiations performed with 6-monthly paliperidone palmitate in routine clinical practice, having opted for a regimen different from the standard for clinical reasons.
Methods: A retrospective selection of patients will be made through non-probabilistic consecutive sampling, including all patients who have been administered 6-monthly paliperidone palmitate with a start different from the standard during the last 4 months. To do this, the electronic medical record will be used, first selecting the patients who have started 6-monthly paliperidone palmitate through the anonymized digital records and, later, including in the study only those who have followed an alternative initiation pattern. The variables studied will be the following: age, sex, diagnosis, dose of paliperidone palmitate, initiation regimen, consumption of toxic substances, absenteeism from 6-monthly paliperidone palmitate, and visits to the emergency room and admissions.

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Results: The study included a total of 20 patients (n: 20). 80% of the patients were male and 20% were female. The mean age was 39.7 years. 75% of the patients had an associated substance use disorder. The following alternate starting schedules were performed with biannual paliperidone palmitate: monthly paliperidone palmitate on days 1 and 8, and 6-monthly paliperidone palmitate on day 38 (n: 11); monthly paliperidone palmitate 150 mg together with semi-annual paliperidone palmitate both on day 1 (n: 5); biannual paliperidone palmitate on day 1 supplemented with oral paliperidone for 45 days (n:4). A total of 0 visits to the emergency department and 0 admissions were observed after the 6-monthly paliperidone palmitate regimen.
Conclusions: Alternative initiations with 6-monthly paliperidone palmitate may be a useful and safe clinical alternative in patients with very low adherence who, due to clinical needs, require starting 6-monthly paliperidone palmitate earlier in order to guarantee adherence.

Disclosure of Interest: None Declared

EPP0758

Clinical experiences with 6-monthly paliperidone palmitate beyond the diagnosis of schizophrenia. A retrospective study

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Introduction: Long-acting injectable antipsychotics (LAIA) are used in diagnoses other than schizophrenia. Over the last two decades, LAIAs have been developed with less administration frequency, going from 2-weekly presentations to 6-monthly presentations. The 6-monthly paliperidone palmitate has recently been released, allowing a reduction in the frequency of administration compared to the 1-monthly presentation and the 3-monthly presentation. Descriptive studies based on real clinical evidence can be very useful to assess clinical outcomes.
Objectives: The main objective of the study is to describe the use of 6-monthly paliperidone palmitate in patients with schzophrenia, providing variables that objectify the evolution such as the number of psychotic decompensations.
Methods: Retrospective descriptive study with a sample selected by non-probabilistic consecutive sampling, retrospective type, in a time interval of 10 month (n=80). The patients selected were all those who received 6-monthly paliperidone palmitate treatment from after 10 months of use at Hospital Universitario Infanta Elena. A descriptive analysis was performed. Mean and standard deviation were calculated for quantitative variables and N and percentage for categorical variables.
Results: A total of 80 administrations of 6-monthly paliperidone palmitate were performed in the study. None of the patients presented adverse reactions related to the administration of the drug, not reporting local pain or inflammation of the puncture area, except for the characteristic discomfort of an intramuscular puncture. Regarding the efficacy of 6-monthly paliperidone palmitate, none of the patients presented a psychotic decompensation after its administration, maintaining psychopathological stability after the change. The switch to 6-monthly paliperidone palmitate was made from both 1-monthly paliperidone palmitate and 3-monthly paliperidone palmitate, both showing the same efficacy. Regarding tolerability, all the patients who were administered 6-monthly paliperidone palmitate were previously treated with the monthly and quarterly presentation of the same molecule, having presented good tolerability to it, maintaining said tolerability after treatment. change to 6-monthly paliperidone palmitate, with no adverse reaction being recorded after the change. The adherence presented by the patients was very good, performing 100% of the administrations.
Conclusions: 6-monthly paliperidone palmitate may be an effective and well-tolerated treatment for the treatment of schizophrenia and other diagnoses such as bipolar disorder or borderline personality disorder. According to objective data, 6-monthly paliperidone palmitate could be an effective and well-tolerated treatment as an alternative to monthly and quarterly presentations of the same molecule. Longitudinal studies must be carried out to confirm this hypothesis.

Disclosure of Interest: None Declared

EPP0759

Patients' perspectives on switching from one to three monthly Paliperidone Palmitate a cross-sectional patient satisfaction survey

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Introduction: Paliperidone 3-monthly (PP3M) is a long-acting injectable antipsychotic (LAI) which has been shown to be an equally effective and more convenient alternative to Paliperidone 1-monthly (PP1M) (Hope *et al.* Australas Psychiatry 2018;26 (2):206-209). A prerequisite for PP3M use is stability on a consistent dosing of PP1M ≥4 months, though, few studies have so far explored patients' experiences with switching.
Objectives: The aim of the study was to assess satisfaction and perspectives following the change to PP3M. A safety question with regards to the Covid-19 was also included.
Methods: This cross-sectional survey was performed within a large, urban mental health setting between May-June 2021 while the UK was still under Covid-19 restrictions. Two psychiatrists obtained verbal consent before administering the survey. Questions 1 and 2 focused on satisfaction and safety with respondents rating to what extent they agreed or disagreed using a 5-point Likert scale. Questions 3 and 4 focused on advantages and disadvantages of the medication change; suggested answers were supplied but there was also an option to provide additional responses. Additional demographic and clinical information were collected from the electronic records.
Results: Of the 61 patients who were receiving PP3M at the time of the survey 46 (31 male and 15 female) agreed to participate. One declined to participate, while 14 were not contactable, making the response rate 98% (46/47).
89.5% of respondents strongly agreed or agreed that they were satisfied after switching, 6.5% neither agreed nor disagreed and