

Conclusions: The diagnosis of LOS can easily be overlooked as these patients do not present the typical profile of persons with schizophrenia. However, they experience non specific and psychotic symptoms over years. A closer examination of these patients' coping strategies during the premorbid phase could provide new psychoeducational insights that may support the recovery of other patients with schizophrenia. The presence of psychotic symptoms several years before the first contact with psychiatry highlights that the onset of the illness is not merely a technical issue, but also a conceptual one.

Disclosure of Interest: None Declared

EPP704

Early mother-child relationships in schizophrenic patients hospitalised at the Arrazi psychiatric hospital in Salé

N. Ait Bensaid^{1*}, M. Sabir^{1,2} and F. El Omari²

¹arrazi psychiatric hospital, Sale, Morocco and ²HAS, arrazi psychiatric hospital, Sale, Morocco

*Corresponding author.

doi: 10.1192/j.eurpsy.2025.897

Introduction: Schizophrenia is a highly complex mental disorder. It is associated with hallucinations and delusions. Caring for a patient with schizophrenia presents major challenges, especially for mothers. The mother-child relationship is one of the first relationships to be formed, serving as the basis for other human relationships [1,2]. The mother is the most important person shaping the child's behaviour.

Although schizophrenia has biological and genetic causes, the environment in which the person grew up is very important.

Translated with DeepL.com (free version)

Objectives: To explore the childhood experiences of patients with schizophrenia with their mothers in order to identify the early mother-child relationship in these patients.

Methods: This was a descriptive cross-sectional study using a questionnaire including sociodemographic and clinical criteria as well as questions to assess patients' childhood experiences with their mothers and patients' feelings towards their mothers.

Inclusion criteria were patients' willingness to participate in the study. Participants were male schizophrenic patients over 18 years of age hospitalised at the Arrazi Psychiatric Hospital in Salé.

Exclusion criteria: intellectual disability.

Key words: Schizophrenia, mother-child relationship, emotions, patients.

Results: In this study, a total of 88 male patients with schizophrenia were collected. The majority had an average socio-economic status. Almost 77% were single and 89% lived with their families. All participants were unemployed. 91% had a substance use disorder, including tobacco and cannabis. 77% had reported psychological abuse by their mother and 55% had reported physical abuse. All the participants had received comparisons with other children and the majority reported having already felt that they were going to be abandoned by their mother. 75% reported having played the role of parent for their parents in childhood. 88% of the participants had feelings of anger and blame for their mother, 20% had feelings of security, 51% had ambivalent feelings of love and hate at the same time.

Conclusions: The present study showed that the early relationship between mother and child in patients with schizophrenia was associated with complex and ambivalent emotions and was also characterised by alternating feelings of hatred and love. Feelings of abandonment of the child and lack of attention to the child's basic needs caused patients many emotional problems towards their mothers.

Disclosure of Interest: None Declared

EPP705

A systematic review of the social determinants of physical and mental health in women with schizophrenia: focus on housing conditions

A. González-Rodríguez^{1*}, M. Natividad², M. G. Jiménez³, L. C. Susser⁴, R. Ayasa-Arriola⁵, E. Izquierdo², A. Balagué², J. P. Paolini San Miguel², N. Bague², A. Pérez², M. Salvador² and J. A. Monreal¹

¹Mental Health, Mutua Terrassa University Hospital. University of Barcelona. CIBERSAM; ²Mental Health, Mutua Terrassa University Hospital. University of Barcelona, Terrassa; ³Faculty of Education, International University of La Rioja, Logroño, Spain; ⁴Psychiatry, New York-Presbyterian/Weill Cornell Medical Center. White Plains, New York, United States and ⁵Psychiatry, Marqués de Valdecilla University Hospital, IDIVAL, School of Medicine, University of Cantabria., Santander, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2025.898

Introduction: The ecological hypothesis for schizophrenia supports the relationship between the urban environment and the clinical expression of severe psychosis. Housing conditions have been poorly studied.

Objectives: Our aim was to investigate the impact of housing conditions on schizophrenia, particularly in women.

Methods: A systematic literature search was conducted in PubMed, Scopus and ClinicalTrials.gov from inception to July 2024 according to the PRISMA guidelines. Search terms: (housing conditions) OR (poor housing) AND health AND schizophrenia.

Results: The search yielded 301 articles, from which 16 were included. Only three studies reported results specifically to women.

1) Building (n=4). Poor housing conditions associated with better self-esteem (n=1), but increased incidence of schizophrenia in African-Caribbeans (n=1). Despite difficulties in accessing adequate housing (n=1), schizophrenia patients showed high resilience (n=1).

2) Housing environment (n=4). Living in deprived neighbourhoods associated with higher negative symptoms (n=1) and poor community adjustment (n=2). Importance of the house's proximity to places for recreation (n=1).

3) Living in group/independent housing (n=3). Women living in institutions need more physical care than men (n=2). Living in shared accommodation reduces social loneliness and quality of life (QoL) (n=1).

4) Private homes/ boarding houses (n=3). Boarding houses are the least preferred type of community accommodation compared to private homes (n=3).

5) Social support/QoL (n=2). Lower QoL is associated with non-institutional housing (n=1). Housing type may influence cognitive function (n=1).

Conclusions: Inadequate housing is negatively associated with mental health outcomes in schizophrenia. Few studies have investigated light, ventilation and internet access with health and QoL. Future studies should investigate housing conditions, especially in women.

Disclosure of Interest: None Declared

EPP706

The profile of autistic traits in patients with psychotic disorders

M. Milovanovic¹, M. Vlaisavljevic¹, R. Grujicic^{1,2}, S. Perovic¹ and V. Mandic Maravic^{1,2,*}

¹Institute of Mental Health and ²Psychiatry, School of Medicine, University of Belgrade, Belgrade, Serbia

*Corresponding author.

doi: 10.1192/j.eurpsy.2025.899

Introduction: Autistic traits are typical, but not pathognomonic for autism spectrum disorders (ASD) and they can also be observed in individuals with psychotic disorders (PD). The Adult Autism Spectrum Quotient (AQ) serves as a screening test for autism, assessing five categories of autistic traits (AT). Previous research has shown that both ASD and PD have significantly higher AQ scores compared to healthy population (1).

Objectives: To evaluate the profile of AT in patients with PD compared to healthy controls (HC), as well as to compare the profiles of AT between individuals with schizophrenia and those with unspecified psychotic disorder.

Methods: This cross-sectional study included 38 individuals with PD and 80 HC. The instruments used in the research included: AQ50, Social Adaptation Self-Evaluation Scale – SASS, and Sheehan Disability Scale.

Results: Sociodemographics are shown in table 1. The PD group had significantly higher scores than the HC for the overall AQ score and its sub-scores, except for attention to detail (ATD) (Graph 1). In the whole sample, there was a significant negative correlation between AQ scores and social functioning (Pearson Correlation .331, $p=0,000$). There were no differences between patients with schizophrenia and unspecified psychotic disorder regarding AQ score ($p=0,466$), while patients with schizophrenia showed significantly lower social and overall functioning (SASS total $p=019$; Sheehan total $p=0,001$).

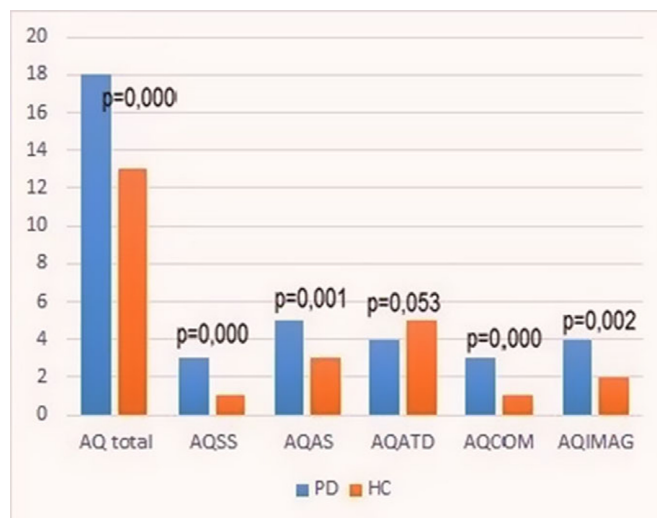
Table 1

	PD (n=38)	HC (n=80)	Test	P
Sex (male)	22 (58,9%)	34 (41,4%)	$\chi^2=3,25$	0,086
Age (years)	41,8 ± 12,8	34,3 ± 11,7	$t=-3,22$	0,06
Treatment duration	16,7 ± 9,9			
ICD-10 diagnosis				
F20	22 (56,4%)	-		
F29	17 (43,6%)	-		
SASS total	40,5 ± 7,4	44,7 ± 5,9	$t=3,4$	0,02
Sheehan total	13,3 ± 8,5			

Graph 1 legend

AQSS – AQ social skills; AQAS – AQ attention switching; AQATD – AQ attention to detail; AQCOM – AQ communication; AQIMAG – AQ imagination

Image 1:



Conclusions: Recognizing autistic symptoms in individuals with PD can be important for their social functioning, as well as for establishing an individualized approach to treatment, both pharmacological and non-pharmacological. It appears that AT impact social functioning differently in HC vs PD group. Further studies on correlation of AT with clinical outcomes in PD are warranted.

References

De Crescenzo F, Postorino V, Siracusano M, Riccioni A, Armando M, Curatolo P, Mazzone L. Autistic Symptoms in Schizophrenia Spectrum Disorders: A Systematic Review and Meta-Analysis. *Front Psychiatry* 2019;10:78.

Disclosure of Interest: None Declared

EPP709

Mental Labyrinth: A Case of Treatment-Resistant Schizophrenia and Solutions

F. N. Meral^{1,*} and F. Ekici¹

¹Psychiatry, Selcuk University, Konya, Türkiye

*Corresponding author.

doi: 10.1192/j.eurpsy.2025.900

Introduction: Despite advancements in the pharmacological treatment of schizophrenia, one-third of patients do not respond favorably. In many treatment algorithms, the lack of response after using two antipsychotic treatments at doses equivalent to 400–600 mg/day of chlorpromazine for four to six weeks is considered treatment-resistant schizophrenia.