Automated Battery (CANTAB) and the seven different subdomains of negative symptoms of the Positive and Negative Syndrome Scale (PANSS).
Results: revealed significantly negative correlations of blunted affect with the recognition of happiness, fear, and disgust. Difficulties in abstract thinking, also correlated positively with the recognition of fear. Additionally, we found a significant positive correlation between stereotyped thinking and difficulties in abstract thinking with the response latency in emotion recognition.
Conclusions: Individuals with SSD and domains of negative symptoms showed specific impairments in recognizing the representation of basic emotions. A longitudinal design to make causality statements would be useful for future research. Moreover, emotion recognition should be considered for early detection and individualized treatment.

Disclosure: No significant relationships.
Keywords: schizophrénia; Emotion recognition; negative symptoms; Psychosis

O0117

Clinical features of UK Biobank subjects carrying loss of function variants in genes implicated in schizophrenia pathogenesis

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Introduction: The SCHEMA consortium has identified ten genes in which severely damaging variants substantially increase schizophrenia risk.
Objectives: To characterise the clinical features of carriers of variants causing complete loss of function (LOF) of these genes.
Methods: This research was conducted using the UK Biobank Resource and 200,000 exome-sequenced volunteers were screened to identify carriers of LOF variants in these genes. For these subjects, data fields were extracted which reflected educational and occupational functioning as well as clinical features including diagnoses and medication.
Results: LOF variants in *CACNA1G* were commoner than in SCHEMA cases, suggesting this was not a real schizophrenia susceptibility gene. 159 subjects carried LOF variants in one of the other nine genes and overall they did not have poorer educational or occupational functioning or increased mental or physical health problems. Detailed examination revealed that one had schizophrenia, one had psychotic depression and two had a developmental disorder. Otherwise, a number of subjects had features of minor mental illness such as depression or anxiety and these rates were somewhat increased in subjects carrying LOF variants in *HERC1*, of whom more than half reported having consulted their GP for such problems. However the majority appeared to be entirely normal from a neuropsychiatric point of view.
Conclusions: Although particular genetic variants can substantially increase the risk of schizophrenia, most people carrying them are entirely normal. This further supports the concept of schizophrenia as a distinct illness rather than representing the extreme of a trait which is present in the population.

Disclosure: No significant relationships.
Keywords: loss of function variant; SETD1A; HERC1

O0119

Modified Completion Test (MCT) in Psychological Diagnostics of Patients with Paranoid Schizophrenia — Stage of Filling the Gaps

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Introduction: The study demonstrates potential of the modified completion test (MCT) (text by H. Ebbinghaus) for diagnostics of patients with schizophrenia. MCT includes four stages: 1) filling the gaps in the story; 2) reading and retelling; 3) making up a continuation and a title; 4) retelling the story and its continuation after half an hour (Burlakova,2020).
Objectives: The objective was to research diagnostical potential of the first stage of MCT for patients suffering from paranoid schizophrenia with hallucinatory syndrome.
Methods: The study included 42 patients (28 female, 14 male) with schizophrenia (disease onset at least 5–7 years ago), aged from 19 to 51 (average age 35±8), receiving treatment. Control group consisted of 44 people (average age 37±6), never sought psychiatric help, never diagnosed with any mental disorders. Groups were organized to be equal in gender proportions, age, and educational level.
Results: The psychiatric patients in comparison to the control group: 1) accomplished the task slower; 2) although instructed to fill the gaps in succession, often violated the instruction and demonstrated orientation on specific fragments rather than on the whole; 3) had lower efficiency: ˜5% of the clinical group did the task without mistakes; 4) chose strategies of interacting with the text not detected in the control group: a) did not fill several gaps, b) added words outside the gaps, and c) crossed out fragments of the text; 5) filled the gaps with words inadequate emotionally, semantically and/or logically.
Conclusions: Comparative analysis demonstrated that already on the first stage, the method proves informative in pathopsychological assessment.

Disclosure: No significant relationships.
Keywords: thought disorder; cognitive assessment; schizophrénia; cognitive functions

O0120

A family study on first episode of psychosis patients: exploring neuropsychological performance as an endophenotype

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