

age was 22.18 ± 6.09 years. The mean follow-up duration was 133.09 ± 56.94 months. The mean GAF scores were 51.44 ± 12.71 at baseline, 60.00 ± 9.48 at the end of the first year, 62.14 ± 9.04 at the end of the second year, and 62.89 ± 8.34 at the end of the fifth year. There was a significant effect of time on GAF scores, $F(2.56, 182.8) = 26.43$, $p < 0.001$, partial $\eta^2 = 0.29$, with scores improving significantly from baseline to year 1 ($p < 0.001$), and further improving by year 5 ($p = 0.034$). There was also a significant effect of time*gender interaction on GAF scores, $F(2.56, 40.9) = 6.17$, $p = 0.001$, although there is no direct effect of gender ($p = 0.740$). No direct effect of education or time*education interaction was found (p values > 0.05). Additionally, baseline RAVLT-5 ($r = 0.725$; $p < 0.001$), Stroop Time difference ($r = -0.718$; $p < 0.001$), WCST correct answers ($r = 0.644$; $r = 0.003$), category completed ($r = 0.630$; $p = 0.004$), and SANS scores ($r = -0.427$; $p = 0.42$) significantly correlated with GAF in the 5th year. Among the CTQ subscores, physical abuse was significantly correlated with GAF in the 5th year ($r = -0.415$; $p = 0.009$).

Image 1:

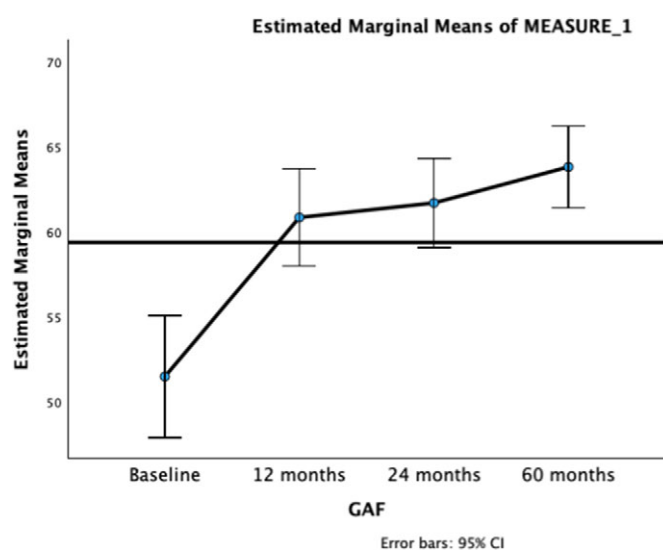
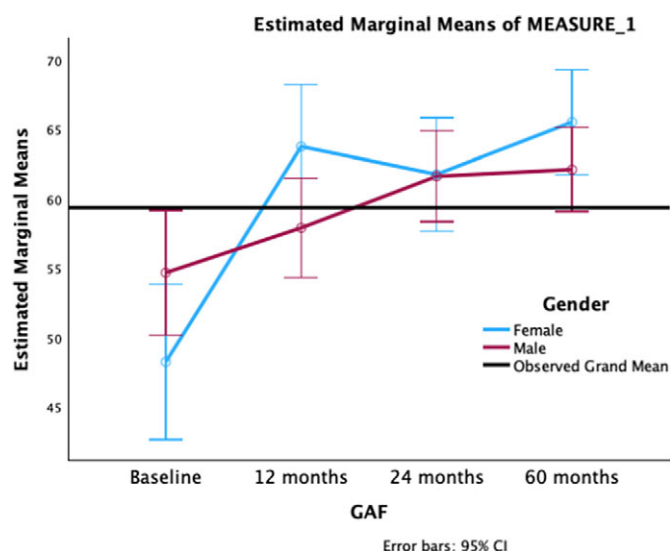


Image 2:



Conclusions: GAF scores improved significantly over the 5-year follow-up in FES patients, with notable improvements occurring in the first year. Baseline cognitive performance, negative symptoms, and childhood trauma were found to be significant correlates of functioning, highlighting potential targets for early intervention.

Disclosure of Interest: None Declared

EPP442

Voices in patients with schizophrenia talk in short, simple sentences

P. Del Olmo^{1*}, P. Fuentes-Claramonte^{1,2}, J. Soler-Vidal^{1,2}, F. Neuhaus^{1,3}, L. López-Araquistain^{1,4}, L. Barbosa¹, P. Salgado-Pineda^{1,2}, S. Sarro^{1,2}, R. Salvador^{1,2}, J. Rosselló-Ximenes⁵, P. J. McKenna^{1,2} and E. Pomarol-Clotet^{1,2}

¹FIDMAG Germanes Hospitalàries Research Foundation; ²CIBERSAM, ISCIII, Barcelona, Spain; ³Maastricht University, Maastricht, Netherlands; ⁴Hospital Sant Rafael and ⁵Departament de Filologia Catalana i Lingüística General, Universitat de Barcelona, Barcelona, Spain

*Corresponding author.

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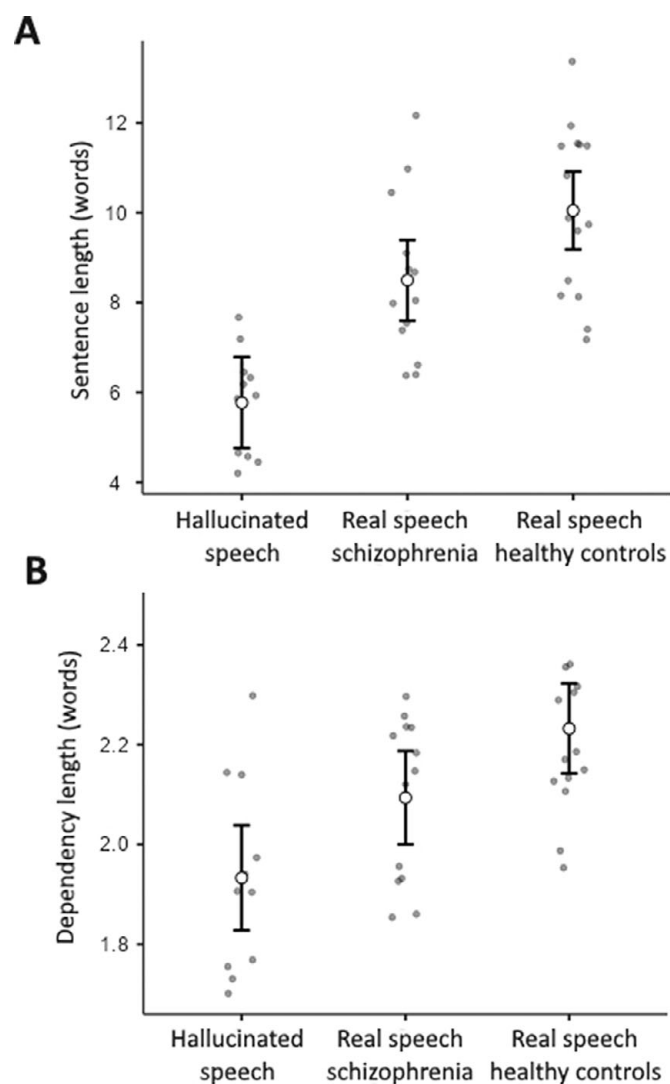
Introduction: Auditory verbal hallucinations (AVH) are prevalent in schizophrenia and are often distressing. However, relatively little is known about their linguistic structure, although a number of authors have commented that they tend to take the form of short, syntactically simple sentences (Tovar *et al* Schizophr Res 2019; 206 111-117; Corona-Hernández *et al* Schizophr Res 2022; 241 210-217). It has been suggested that these features may be related to the high frequency with which AVH feature insults and commands (which are normally short and simple).

Objectives: We aimed to quantify sentence length and complexity of AVH in schizophrenia patients, and to examine how far length reductions were attributable to presence of insults and commands. We also examined the same variables in real speech from patients with schizophrenia and healthy controls.

Methods: We transcribed verbatim AVH from 11 patients with very frequent AVH following a previously used protocol (Fuentes-Claramonte *et al* Sci Rep 2021; 23 18890). Mean sentence length and mean dependency distance (a measure of syntactic complexity) were calculated using the *udpipe* package in R. Insults and commands were also coded. For comparison, (real) speech samples were collected and transcribed from patients with schizophrenia (N=14) and healthy controls (N=15). All groups were matched for age, sex and estimated premorbid IQ.

Results: We found that AVH sentences were on average significantly shorter ($t_{(37)} = -6.51$, $p < 0.001$; see Fig. 1A) and syntactically simpler ($t_{(37)} = -4.37$, $p < 0.001$; see Fig. 1B) than in the (real) speech of healthy controls. AVH sentences were also shorter (Fig. 1A) and simpler (Fig. 1B) than the speech of schizophrenia patients, although the latter comparison only approached significance ($t_{(37)} = -4.09$, $p < 0.001$ and $t_{(37)} = -2.31$, $p = .08$, respectively). After insults and commands were removed from the analysis, AVH sentences were still shorter ($t_{(37)} = -6.09$, $p < 0.001$) and simpler ($t_{(37)} = -3.89$, $p < 0.001$) than those in the speech of controls, and shorter ($t_{(37)} = -3.68$, $p < 0.01$) than those in the speech of patients, but not simpler ($t_{(37)} = -1.86$, $p = 0.213$).

Image 1:



Conclusions: From our data AVH mainly (though not exclusively) take the form of short and simple sentences. These features are not explained by presence of insults and commands.

Disclosure of Interest: None Declared

EPP443

Clozapine: prescribing practices in French psychiatric hospitals, multicenter survey on a given day

D. Espeillac¹, E. Queuille^{2,3} and R. Klein^{1*}

¹Haute-Garonne, Ferrepsy, Toulouse; ²Gironde, CH Charles Perrons, Bordeaux and ³Nord, Association du réseau PIC, Armentieres, France
*Corresponding author.

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Introduction: Efficacy of clozapine has now been proven for all symptoms of resistant schizophrenia. Yet it remains underused in

view of the prevalence of drug resistance and unevenly prescribed worldwide despite a general trend towards increasing prescribing (Bachmann et al. *Acta Psychiatr Scand* 2017; 1-15). Data on hospital clozapine prescribing in France are older and single-center (Mercier et al. *L'Encéphale* 2009; 35, 321-329). Collaboration between a national multi-professional network (pharmacist, general practitioner, psychiatrist) working in various public or private mental health establishments (the PIC network) and a regional psychiatric research federation (FERREPSY Occitanie) has enabled a broad and up-to-date study of practices.

Objectives: To assess the prevalence of clozapine prescribing among patients hospitalised in full-time psychiatry on a given day. To assess the prevalence of clozapine prescribing in inpatients with a diagnosis of non-organic psychotic disorder (ICD 10: F20-F29). To study the characteristics of patients treated, prescribing methods and clinical monitoring.

Methods: A cross-sectional observational study was carried out in December 2023 with teams from establishments belonging to the PIC and/or FERREPSY network who had volunteered.

Results: 30 centers took part in the study, with a total of 795 patients included. The average age was 44.1 years (66% men and 34% women). 14.05% of hospitalised patients were receiving clozapine treatment on the day of the survey. 25.07% of patients with a diagnosis of non-organic psychotic disorder were receiving clozapine treatment. 26.83% of clozapine prescriptions were off-label, mainly for patients with mood disorders. 91.94% of patients had had their blood pressure measured in the quarter preceding the survey, and 91.82% had been weighed. Conversely, only 31.94% had their umbilical circumference measured.

Conclusions: This study found that the prevalence of prescribing among patients with non-organic psychotic disorders in the hospital was higher than expected, according to European data on clozapine prescription. Further data on outpatient use are still required.

Disclosure of Interest: None Declared

EPP444

Sex-related differences in long-term tolerability of Risperidone ISM treatment in adult patients with schizophrenia

J. Martínez González^{1*}, C. Sherif², L. Anta Carabias¹, M. Almendros Gimenez¹, C. Salazar García¹ and C. U. Correll^{3,4,5,6,7}

¹Medical Department, Laboratorios Farmaceuticos ROVI S.A., Madrid, Spain; ²Medical Affairs, ROVI Biotech Ltd., Croydon, United Kingdom; ³Department of Psychiatry and Molecular Medicine, Donald and Barbara Zucker School of Medicine at Hofstra/Northwell, Hempstead, NY; ⁴Department of Psychiatry Research, The Zucker Hillside Hospital, Glen Oaks, NY, United States; ⁵Department of Child and Adolescent Psychiatry, Charité Universitätsmedizin Berlin, Berlin, Germany; ⁶Center for Psychiatric Neuroscience, The Feinstein Institute for Medical Research, New Hyde Park, NY, United States and ⁷German Center for Mental Health, Partner Site Berlin, DZPG, Berlin, Germany

*Corresponding author.

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Introduction: Sex-related differences in antipsychotic treatment exist with some specific differences having been reported with risperidone use. Women may respond better to antipsychotics than men, but also experience more side effects. In a randomised