

using a range of assessment tools to fully capture the multifaceted nature of patient experiences. Future studies should explore these relationships further to refine the tools used for assessments and to tailor intervention strategies effectively.

Disclosure of Interest: None Declared

EPV1792

the relationship between childhood sexual abuse and the development of schizophrenia, ptsd and substance abuse among men through life

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Introduction: Background and aims: There is a lack of research regarding the topic of childhood sexual abuse trauma on men population. Childhood experiences and traumas can have a great impact on various life domains, including mental state and addictions.

This study examines the impact of childhood sexual abuse on men diagnosed with schizophrenia – regarding the age of the disease's appearance, the appearance of additional PTSD diagnosis and substance use throughout life.

Objectives: This study can contribute to the development of more effective treatment and prevention strategies for men who have experienced childhood sexual abuse and are diagnosed with schizophrenia.

Methods: Participants: 60 Male patients hospitalized in the closed wards for men, aged 18-50 at 'Merhavim' - Mental Health Center. Data Collection: A one-time meeting with the research team, which included completing several questionnaires regarding their current state and childhood experiences.

Results: The influence of childhood sexual abuse was significant in all subjects we examined. Patients of suffered from sexual abuse in their childhood were more likely to develop PTSD or develop schizophrenia at a much younger age. Also, they were more likely to suffer from substance abuse throughout their life.

Conclusions:

- Childhood sexual abuse has a significant impact on the onset of schizophrenia symptoms (age of first hospitalization), PTSD symptoms and substance abuse throughout life.
- Traumatic childhood experiences have a significant impact on mental symptoms that appear in adulthood as well as on various behaviors throughout life.

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EPV1794

Inverse dose-dependent effects of aripiprazole on sexual dysfunction and prolactin levels in patients with schizophrenia

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Introduction: Aripiprazole, a novel antipsychotic drug with partial agonist activity at dopamine D₂ and serotonin 5-HT_{1A} receptors, as well as antagonist activity at 5-HT_{2A} receptor, has demonstrated fewer side effects, including extrapyramidal symptoms, hyperprolactinemia, and metabolic disturbances, compared to other antipsychotic drugs.

Objectives: The aim of this study was to examine the dose-dependent impact of aripiprazole on sexual dysfunction and prolactin levels in patients with schizophrenia. Patients with schizophrenia under aripiprazole monotherapy were recruited into this study.

Methods: Patients with schizophrenia under aripiprazole monotherapy were recruited into this study. Psychopathology and sexual dysfunction were evaluated using the Positive and Negative Syndrome Scale and the Arizona Sexual Experiences Scale (ASEX), respectively. Fasting blood samples were analyzed to measure metabolic parameters and prolactin levels.

Results: We recruited 128 patients with schizophrenia, comprising 86 females and 42 males. The prevalence of hyperprolactinemia, hypoprolactinemia, sexual dysfunction, and metabolic syndrome was 12.5%, 47.6%, 39.1%, and 36.7%, respectively. Patients with sexual dysfunction exhibited higher prolactin levels and a higher prevalence of hyperprolactinemia compared to those without sexual dysfunction. The ASEX scores showed a positive correlation with prolactin levels and a negative correlation with aripiprazole dose. Multivariate analysis revealed that prolactin levels and age were associated with ASEX scores. Prolactin levels were negatively correlated with aripiprazole dose and metabolic parameters. Multivariate regression analysis indicated that aripiprazole dose was associated with prolactin levels.

Conclusions: Aripiprazole exhibited inverse dose-dependent effects on prolactin levels and ASEX scores in patients with schizophrenia. Regular monitoring of prolactin levels and sexual function is recommended for patients with schizophrenia receiving aripiprazole treatment.

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EPV1795

High risk of psychosis, condition or diagnosis? About a case

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Introduction: A person with "high-risk mental status (HRMS)" indicates that the person, usually young people between the ages of 14 and 25, is more likely to develop psychosis. These people have attenuated psychotic symptoms without reaching the intensity or frequency of a frank psychotic episode. It is suggested that psychological trauma could favor neurochemical and psychopathological changes in a vulnerable individual. It would be interesting to study the role of psychotherapeutic interventions in the course of high-risk mental states and their possible evolution to a psychotic disorder. We present the case of an 18-year-old adolescent whose diagnosis was high risk of psychosis.

Objectives: This work has several objectives. On the one hand review current information on high-risk mental status (EMAR). On the other hand, develop a discussion about whether the EMAR category should be a diagnostic entity or just a condition.

Methods: A bibliographic search has been carried out in the main sources of medical information such as Pubmed, Uptodate as well