

Among patients 13 had criteria for NSS (NSS+) and 7 did not meet criteria for NSS (NSS-). None of the HC exhibited NSS. NSS+ patients had more cognitive impairment than NSS- in the WCST.

While HC exhibited acquisition abilities for both spatial maze tasks, NSS+ patients were unable to learn any of them. NSS- patients, failed to learn during the virtual task but behave like control subjects in the tactile task. Data from rotation and permutation tasks in both virtual and tactile mazes could show that NSS+ and NSS- relied on different strategies and cues to try to solve the task. While NSS+ patients were totally unable to succeed the various tasks in the virtual and the tactile maze, NSS- individuals approached the HC performance in the tactile maze by using compensatory strategies but not in the virtual maze.

Discussion: Spatial memory is differently affected in schizophrenia patients as a function NSS. Spatial strategies differs in HC, NSS-, and NSS+ as a function of the type of cues (local vs distal) and the type of maze (virtual versus tactile) indicating that not only performance should be taken into account during the appraisal of spatial memory in schizophrenia

S53. DELINEATING SOCIAL COGNITION IN AUTISM AND PSYCHOSIS

Tim Ziermans^{*1}, Sophie van Rijn², Hilde Geurts¹, Lieuwe De Haan³

¹University of Amsterdam; ²Leiden University; ³Amsterdam University Medical Center, University of Amsterdam, The Netherlands

Background: Impaired social cognition represents a common feature in both the autism and psychosis spectrum, but direct comparisons are sparse and assessments typically restricted to a few tasks with limited ecological validity. The first aim of the present study was to compare the social cognitive profile of young individuals with autism spectrum disorder (ASD) or a first episode psychosis (FEP) with a group of typical comparisons (TC) on a comprehensive social cognition test battery. The second aim was to explore the relative contribution of autistic and psychotic traits to social cognitive performance across groups.

Methods: In total 90 young individuals (M = 21.9 y, SD = 3.1 y, range = 16–30 y, 67% male) were recruited. Groups (31 FEP, 21 ASD, 38 TC) were matched for age and sex. Social cognition assessment included measures for static and dynamic emotion recognition & social inference / Theory of Mind, social attention (eye-tracking), empathy and alexithymia. Autistic and psychotic traits were assessed with self-report questionnaires (AQ-28 & SPQ-br).

Results: Data collection is completed at the time of abstract submission and analyses are expected to be finalized in February 2020.

Discussion: Pending the outcome of our analyses, we expect our results will provide a more complete and detailed picture of shared and unique aspects in the social cognitive profile of autism and psychosis. In general we hypothesize that both ASD and FEP, on a group-level, will significantly underperform compared to TC, but that the respective trait dimensions will each explain a unique amount of variance in social cognitive performance.

S54. THE RELATION OF FORMAL THOUGHT DISORDER WITH COGNITIVE FUNCTIONS, GLOBAL AND SOCIAL FUNCTIONING AND QUALITY OF LIFE IN PATIENTS WITH SCHIZOPHRENIA

Emre Mutlu^{*1}, Hatice Abaoğlu², Elif Barışkın², Esra Aki², A. Elif Anıl Yağcıoğlu², M. Kazım Yazıcı²

¹Etimesgut Sehat Sait Erturk State Hospital, Turkey; ²Hacettepe University

Background: Formal thought disorder (FTD) is considered to be a core syndrome of schizophrenia (SZ). Although there are few studies investigating the cognitive correlates in FTD, etiopathogenesis of this cluster of symptoms is not fully elucidated. Additionally, the impact of FTD on the global and social functioning and life satisfaction is yet unclear. The Thought and Language Disorder Scale (TALD) is a comprehensive, 30-item scale covering both positive/negative and objective/subjective FTD symptoms. Its unique four factorial structure is an excellent advantage to find out the relation between FTD dimensions and cognitive abilities, functioning and quality of life. This study aims to analyze the relationship between FTD which was assessed with TALD and cognitive functions, global, social functioning and quality of life in patients with SZ.

Methods: Patients who met DSM-5 criteria for schizophrenia and aged between 18 and 65 years were recruited from the Department of Psychiatry, Hacettepe University Faculty of Medicine. The Turkish version of Thought and Language Disorder Scale (TALD-TR) was administered to detect formal thought disorder symptoms. The Positive and Negative Syndrome Scale (PANSS) and Clinical Global Impression-Severity Scale (CGI) were used to assess psychopathology and illness severity. Cognitive functions were investigated using a neuropsychological test battery (working memory, verbal fluency, abstract thinking, executive functions and response inhibition). The Functioning Assessment Short Test (FAST) and the Social Functioning Scale (SFS) were administered to assess global and social functioning, World Health Organization Quality of Life Instrument Short Form (WHOQOL-BREF) was administered to assess quality of life.

Results: The sample consisted of 46 patients (mean age 39.4 ± 10.8) and 39% (N=18) of the participants were females. Mean duration of education was 11.5 ± 3 years and mean duration of illness was 15 years. Partial correlation analyses, controlling for age and duration of education, showed that the Objective Positive FTD was associated with a deficit in executive functions and that the Objective Negative FTD was associated with impairment in working memory, category (semantic) verbal fluency, executive functions, abstract thinking and response inhibition. There was a significant negative correlation between Subjective Negative FTD and verbal fluency (alternation) whereas Subjective Positive FTD was correlated positively with lexical verbal fluency. Although FTD was significantly correlated positively with deficits in social, interpersonal and occupational functioning, no relation was detected between FTD and self-reported quality of life.

Discussion: Our findings indicate that the multidimensional symptomatology of FTD could be the result of different cognitive impairments. In line with the literature, both objective positive and objective negative FTD were related to executive deficits. Additionally, working memory, verbal fluency, abstract thinking and response inhibition were correlated with objective negative FTD. To our knowledge, the relation between subjective FTD and verbal fluency is a novel finding in FTD research. Because of the close relationship between FTD and general /social functioning, FTD should be considered as one of the main treatment goals in schizophrenia. It could be suggested that investigating objective quality of life along with subjective assessments could better clarify the effect of FTD on patient's life satisfaction. Comparison with healthy individuals, and future addition of neuroimaging investigations would further support the interpretation of these results.

S55. PRAGMATIC INFERENCES IN SCHIZOPHRENIA: RELATIONSHIP WITH SYMPTOM DOMAINS, THEORY OF MIND AND NEUROCOGNITIVE FUNCTIONS

Berna Yalincetin^{*1}, Emre Bora¹, Berna Binnur Akdede¹, Köksal Alptekin¹

¹Dokuz Eylul University, School of Medicine, Turkey

Background: Severe impairment in interpersonal functioning is a common feature of schizophrenia. Deficits in communicative abilities are likely