MANOVA profile analyses revealed that patients who met CIAPs criteria showed cognitive impairment in all the cognitive domains except for social cognition. Patients diagnosed with Kraepelin's criteria showed significant differences in processing speed, visual memory, working memory and GCI. Patients fulfilling Bleuler and DSM-IV criteria showed significant deficits in processing speed and verbal memory, respectively. Schneider and ICD-10 diagnostic criteria did not reveal differences in cognition between patients who fulfilled these criteria.
Conclusions: CIAPs criteria were the most accurate classifying patients with cognitive impairment, followed by Kraepelin's criteria, which were the ones among diagnostic criteria which better differentiated patients regarding cognitive impairment. These criteria take into consideration the outcome in addition to symptoms.

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Keywords: schizophrénia; cognition; diagnostic criteria

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Preliminary results of a network meta-analysis on the efficacy of long-acting injectable antipsychotics in schizophrenia

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Introduction: Long-acting injectable antipsychotics (LAIs) are currently the most effective alternative for patients with schizophrenia who exhibit poor adherence. Although a recent meta-analysis reported similar efficacy between first and second-generation LAIs, these results were only based on 3 studies due to the limited number of head-to-head comparisons.
Objectives: Present the preliminary results of a network meta-analysis on the comparative efficacy of LAIs in schizophrenia.
Methods: Studies were obtained from a previous study, where we carried out a systematic search from until May 2019 in various databases. Included trials of adults with schizophrenia compared the efficacy of LAI vs LAI or placebo through the Positive and Negative Syndrome Scale (PANSS). Efficacy was evaluated through the mean differences (MD) from baseline to endpoint in the PANSS total scores. Network meta-analysis was performed in MetaInsight through direct and indirect comparisons using a Bayesian approach.
Results: from 12 studies are presented in Figures 1 and 2. All LAIs except zuclopenthixol were more effective than placebo. There were no significant differences between LAIs except for aripiprazole and risperidone, which were more efficacious than zuclopenthixol. The largest change occurred with aripiprazole LAI, but was not significantly higher than haloperidol.

	Aripiprazole lauroxil	Haloperidol decanoate	Paliperidone palmitate	Risperidone LAI	Placebo	Zuclopenthixol decanoate
Aripiprazole lauroxil		2.78 (-4.4, 9.07)	3.76 (-0.99, 9.02)	2.19 (-2.61, 7.43)	**11.55 (7.25, 15.88)***	**11.38 (1.53, 21.78)***
Haloperidol decanoate			1.05 (-3.22, 6.25)	-0.53 (-5.1, 4.92)	**8.78 (3.94, 14.29)***	8.64 (-1.13, 19.11)
Paliperidone palmitate				-1.58 (-3.9, 0.69)	**7.74 (5.05, 10.08)***	7.51 (-1.45, 16.82)
Risperidone LAI					**9.34 (6.58, 11.78)***	**9.14 (0.38, 18.15)***
Placebo						-0.17 (-9.27, 9.29)

Figure 1. Comparison of treatment pairs. Effect sizes are presented as MD and 95% confidence intervals (*p<0.05).

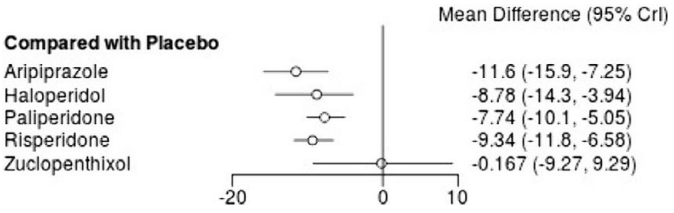

Figure 1. Overall change in symptoms
Conclusions: Preliminary results from a network meta-analysis also suggest that in the long-term haloperidol decanoate is equally effective in overall symptom changes compared to other LAIs. Further analyses are needed to obtain a better perspective on these drugs.

Disclosure: No significant relationships.
Keywords: Depot Antipsychotics; schizophrénia; EFFICACY; network meta-analysis

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Interrelation of visual and olfactory impairments in schizophrenia

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Introduction: In schizophrenia, there are disorders in all sensory modalities, but the regularities of their occurrence, their pathogenesis and attitude towards cognitive functions are not sufficiently studied.
Objectives: Examine the interrelation between the dysfunctions in different analysers (olfactory and visual) and their dependence on the duration of the disease and the severity of psychotic symptoms and cognitive deficit in schizophrenic patients (F20 according to ICD 10 criteria).
Methods: All subjects were determined the threshold of olfactory sensitivity to n-butanol, the ability to discriminate against odors and the amount of error in comparing the same sections. Cognitive functions were evaluated using the BACS scale.
Results: The inverse correlation between the value of the visual assessment error and the reduction of the threshold of olfactory sensitivity (r=- 0.56; $p < 0.05$) and the inverse correlation between the value of the visual assessment error and the ability to discriminate smells (0.64; $p < 0.05$) were revealed. There are no significant correlations between the duration of the disease and sensory disturbances. Olfactory and visual disturbances in schizophrenic patients were connected with cognitive functions ((r=-0,62; p< 0,05 and r=-0,84, p< 0,001 accordingly).
Conclusions: The data confirm that sensory impairments have a common pathogenesis and are closely related to cognitive deficits.