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Poster 17

[P-17-01]

Conditions Associated with Deaths in Individuals with Schizophrenia in Psychiatric Units *Michitaka Funayama¹ (1. Ashikaga Red Cross Hospital (Japan))

[P-17-02]

Exploring Changes in Recognition and Stigmatization Toward Individuals with Schizophrenia in Singapore from 2014 to 2022

*Ke Cao¹, Edimansyah Abdin², Mythily Subramaniam² (1. Duke-NUS Medical School (Singapore), 2. Institute of Mental Health (Singapore))

[P-17-03]

A study on the treatment of psychosis induced by invocation, Kitousei-Seishinbyo *Fumiya Miyano¹ (1. Department of Psychiatry, Hokkaido University Graduate School of Medicine (Japan))

[P-17-04]

PHARMACOTHERAPY OF CATATONIA WITH MODERN ANTIPSYCHOTIC AGENTS: ETHNO-CULTURAL FEATURES OF TREATMENT OF PATIENTS WITH SCHIZOPHRENIA AND COMORBID CHEMICAL ADDICTIONS IN THE NORTHWESTERN AND SIBERIAN FEDERAL DISTRICTS OF RUSSIA.

Georgy Yu. Selivanov^{1,2,3}, Nikolay A. Bokhan¹, *Svetlana V. Vladimirova¹ (1. Mental Health Research Institute, Tomsk (Russia), 2. Saint Petersburg University of State Fire Service of Emercom of Russia (Russia), 3. Psychiatric Hospital of St. Nicholas, St. Petersburg (Russia))

[P-17-05]

Evaluation of ZNF804A (rs1344706) Polymorphism in a Familial Case of Schizophrenia *Halil ibrahim tas¹ (1. Ordu university (Turkey))

[P-17-06]

Contemporaneous changes in cytokines and cognitive function during chemotherapy in patients with breast cancer- a prospective follow up study

*Shu-I Wu¹, Ching-Hung Chen² (1. Mackay Memorial Hospital (Taiwan), 2. Chia-Yi Chang Gung Memorial Hospital (Taiwan))

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Poster 17

[P-17-01] Conditions Associated with Deaths in Individuals with Schizophrenia in Psychiatric Units

*Michitaka Funayama¹ (1. Ashikaga Red Cross Hospital (Japan)) Keywords: Catatonia、Pulmonary embolism、Suffocation

Background: Individuals with schizophrenia die 11–25 years earlier than the general population, yet few studies have examined mortality among hospitalized patients or psychiatric factors contributing to these deaths.

Methods: We retrospectively analyzed 41 inpatients with schizophrenia who died among 1,823 hospitalized at Ashikaga Red Cross Hospital. Psychiatric diagnoses followed ICD-10 criteria, and causes of death were determined by medical specialists.

Results: Pulmonary diseases, including pneumonia (29.3%), were the leading cause of death, followed by cancer (22.0%), heart diseases (14.6%), and pulmonary embolism (4.9%). Psychiatric factors contributed to 48.8% of deaths, with catatonia (29.2%) being most frequent, followed by bedridden status due to severe apathy (7.3%), choking (4.9%), suicide (4.9%), and water intoxication (2.4%). The mean age at death was lower for psychiatric-related deaths (53.1 \pm 14.7 years) than for other cases (62.2 \pm 8.3 years; p < 0.02). Catatonic patients often succumbed to aspiration pneumonia, tachyarrhythmia, or pulmonary embolism, particularly those with malignant catatonia. Severe apathy led to refractory aspiration pneumonia and pulmonary embolism.

Conclusions: Psychiatric conditions significantly impact mortality among schizophrenia inpatients, with some deaths potentially preventable. Improved recognition and management of catatonia and severe apathy could reduce mortality. Despite limitations of a single-center, retrospective design, these findings provide important insights into the interplay between psychiatric and medical conditions in schizophrenia inpatients.

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[P-17-02] Exploring Changes in Recognition and Stigmatization Toward Individuals with Schizophrenia in Singapore from 2014 to 2022

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Keywords: Schizophrenia、Mental Health Literacy、Mental Illness Stigma、Mental Health Campaigns、Singapore

Schizophrenia is a debilitating illness that poses long-term impairment in individuals and a significant economic burden on society. Early recognition of schizophrenia is essential for ensuring successful treatment outcomes. Understanding mental health literacy, i.e., recognition of and stigma towards mental illnesses, is crucial for guiding policy and informing targeted interventions. The current study aimed to examine changes in schizophrenia recognition, personal stigma and social distancing as well as shifts in sociodemographic factors influencing recognition and stigma over 8 years in Singapore. The study utilized data from two consecutive nationwide cross-sectional surveys on mental health literacy using a vignette approach. Singapore citizens and permanent residents aged 18-65 were recruited via disproportionate stratified sampling. Respondents were presented with a schizophrenia vignette and recognition was assessed using an open-ended question. Stigmatizing attitudes were assessed by the personal stigma scale and the social distance scale. Correct schizophrenia recognition increased from 11.5% to 15.1%, though the difference was not statistically significant (p-value = 0.192). Recognition response categories changed significantly with more recognizing schizophrenia as another mental disorder and fewer recognizing it as a general psychological issue. There was a statistically significant reduction in 'weak, not sick' and 'dangerous, unpredictable' stigma scores. A higher 'weak, not sick' score was consistently associated with lower odds of recognition of schizophrenia. The lack of significant improvement in recognition was likely due to a lack of targeted schizophrenia awareness campaigns in Singapore, while the significant improvement in personal stigma was likely due to general mental health initiatives. Younger age and social contact with individuals with schizophrenia were associated with better recognition and less stigma. Individuals of Malay and Indian ethnicities attributed schizophrenia as a personal weakness but showed less social distancing. Future initiatives should focus on culturally tailored anti-stigma interventions for schizophrenia accessible to older individuals and leveraging social contact.

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[P-17-03] A study on the treatment of psychosis induced by invocation, Kitousei-Seishinbyo

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Keywords: Posession, Dissociative Disorder, Dissociative Trance

Kitousei-Seishinbyo(psychosis induced by invocation), initially conceptualized by Masatake Morita, was subsequently identified in various regions across Japan. Over time, it evolved into a broader field of "Possession research," encompassing investigations into phenomena such as personality transformation and altered states of consciousness. More recently, new psychosocial triggers have emerged, including self-improvement seminars and newly formed religious organizations. Despite this shift, the frequency of reports of possession-related episodes has declined as scientific rational thought has advanced, and accordingly, the volume of academic research and publications on the subject has also decreased. In terms of treatment, there have been cases suggesting that psychotherapy can be particularly challenging, owing to blurred boundaries between self and others or inherent psychological vulnerability, thereby highlighting the necessity for continued scrutiny. During our clinical experience, we encountered a noteworthy case of psychosis induced by invocation involving a patient who developed personality transformation and delusional beliefs of possession after contacting a medium, ultimately leading to hospitalization. Nevertheless, we found that addressing practical life challenges and implementing behaviorally oriented treatment strategies yielded significant improvements. Drawing upon previous studies, we offer some preliminary thoughts on therapeutic approaches to prayer-induced psychosis, which remain imperative for contemporary mental health practice. As part of our presentation, we have tried safeguarding the patient's identity and personal details. Written informed consent was obtained to ensure confidentiality and respect for privacy throughout the study and its subsequent dissemination. We hope that this report contributes to a deeper understanding of prayer-induced psychosis and stimulates further exploration into efficacious therapeutic modalities for individuals affected by this condition. In psychiatric treatment, in addition to basic treatments such as medication and psychotherapy, it goes without saying that attention must be paid to family and social aspects. This presentation on Kitousei-Seishinbyo is one such therapeutic perspective.

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[P-17-04] PHARMACOTHERAPY OF CATATONIA WITH MODERN ANTIPSYCHOTIC AGENTS: ETHNO-CULTURAL FEATURES OF TREATMENT OF PATIENTS WITH SCHIZOPHRENIA AND COMORBID CHEMICAL ADDICTIONS IN THE NORTHWESTERN AND SIBERIAN FEDERAL DISTRICTS OF RUSSIA.

Georgy Yu. Selivanov^{1,2,3}, Nikolay A. Bokhan¹, *Svetlana V. Vladimirova¹ (1. Mental Health Research Institute, Tomsk (Russia), 2. Saint Petersburg University of State Fire Service of Emercom of Russia (Russia), 3. Psychiatric Hospital of St. Nicholas, St. Petersburg (Russia)) Keywords: General psychiatry、Catatonia、novel antipsychotics

Relevance: In Russia, the development of new methods of pharmacotherapy of catatonia with antipsychotics in patients with schizophrenia with and without comorbid chemical addictions is relevant, considering ethno-cultural diversity. Objective. To study the effectiveness of atypical antipsychotics in the treatment of catatonia in schizophrenia, considering the presence and absence of chemical addictions and ethno-cultural characteristics of patients. **Patients and methods:** The study included 188 patients, 18-45 years old, drug-independent (n=50), alcohol-dependent (n=44), psychostimulants (n=36), cannabinoids (n=32), opioids (n=26) (Northwestern and Siberian Federal Districts of Russia, 2022-2025). Patients (n=188) were divided into groups receiving antipsychotics: aripiprazole (A=29), brexpiprazole (B=27), cariprazine (K=38), lurasidone (L=34), olanzapine (O=32), risperidone (R=28). Research methods: clinical and psychopathological, psychometric, statistical (Python 3.11.0). The study was approved by the Ethics Committee of the TNRMC RAS (protocol No. 172 of 04/15/2024, case No. 172/2.2024). **Results:** The leading position among patients was occupied by the following ethnic groups: Russians, Tatars; Uzbeks; Germans; Azerbaijanis and Armenians. Anxiolytics and rarely typical antipsychotics were added to the therapy for 14 days. Stages: I. assessment - 21 days, II. - Day 35. △ change indices on the CGI (K=0.031; O=0.041; L=0.051; R=0.061; A=0.121; B=0.14) and PANSS (K=1.32; O=1.58; L=1.65; R=2.28; A=-3.12; B=-3.41) scales. **Conclusions:** In the temperate climate zones of Russia, Russians, Tatars and Uzbeks were in the lead. The following showed effective treatment: cariprazine (3 mg), olanzapine (15 mg), lurasidone (80 mg), risperidone (6 mg), aripiprazole (15 mg), brexpiprazole (4 mg). Cariprazine improved negative symptoms.

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Poster 17

[P-17-05] Evaluation of ZNF804A (rs1344706) Polymorphism in a Familial Case of Schizophrenia

*Halil ibrahim tas¹ (1. Ordu university (Turkey))
Keywords: genetic、schizophrenia、familial

Objective:

Schizophrenia is a complex neuropsychiatric disorder resulting from the interaction of genetic predisposition and environmental factors. This study aimed to evaluate the genotype-phenotype correlation of the rs1344706 single nucleotide polymorphism (SNP) in the *ZNF804A* gene within a family affected by schizophrenia. **Methods:**

Peripheral blood samples were collected from a female proband diagnosed with schizophrenia and five of her close relatives (mother, father, two brothers, and maternal aunt). The rs1344706 SNP genotypes were analyzed and compared with the clinical status of each individual.**Results:**

The proband, her father, and her brother (also diagnosed with schizophrenia) were found to have the heterozygous T/G genotype. The mother and another, unaffected brother carried the G/G genotype. Interestingly, the maternal aunt—who had no history of psychiatric illness—had the T/T genotype. These findings suggest that while the presence of the T allele may be associated with increased risk for schizophrenia, it is not solely sufficient for disease onset. **Conclusion:**

The rs1344706 T allele of *ZNF804A* appears to be a shared genetic factor among affected individuals in this family. However, the occurrence of schizophrenia in a G/G individual (mother) and its absence in a T/T carrier (aunt) implies incomplete penetrance and highlights the importance of other genetic variants or environmental influences. These results support the polygenic and multifactorial nature of schizophrenia.

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[P-17-06] Contemporaneous changes in cytokines and cognitive function during chemotherapy in patients with breast cancer- a prospective follow up study

*Shu-I Wu¹, Ching-Hung Chen² (1. Mackay Memorial Hospital (Taiwan), 2. Chia-Yi Chang Gung Memorial Hospital (Taiwan))

Keywords: Cancer、、chemotherapy、、contemporaneous changes、Cognitive function

Background: This study investigated fluctuations in levels of chosen cytokines among patients with breast cancer before to after chemotherapy. Contemporaneous changes in cognitive function were examined. **Methods:** Adult patients with breast cancer stages I to III without brain metastasis were invited to participate in this longitudinal follow up study. A multidimensional neuropsychological examination was administered at two timepoints evaluating multiple subjective and objective cognitive domains, depression, anxiety, or fatigue before and at least 3 months after chemotherapy, and baseline demographic information. Cytokine levels were taken at the same times. Stepwise multivariate Generalized Linear Mixed Model was used to examine changes in cytokines and associations with changes in cognitive function. **Results:** Over a mean interval of 10.46 months, Event-based prospective memory (p<0.001), Word list immediate (p<0.001) or delayed recall (p=0.024), and self- perceived cognitive impairment (p=0.026) were significantly improved following chemotherapy. Higher levels of IFNy and worse performance on the Color Trails Test Part 1, inverse associations of IFNy or IL-12p70 with Block Design, and TNFα with Digit Symbol Substitution were found, but no significant time effects were noted. However, significant group and time effects were only observed in IL-2 and IL-12p70 with improvements in Event-based prospective memory. That is, from baseline to follow up, each increase in log values of IL-12p70 and IL-2 were associated with 2.18 (SE=0.65, p=0.001) and 2.16 (0.68, p=0.002) points of increase in Event-based prospective memory. No significant effects were detected for other cytokines or cognitive tests. **Conclusion:** Improvements in Event-based prospective memory were positively associated with contemporaneous changes in IL-2 and IL-12p70. Our finding may not only reduce BC patients' concerns about chemotherapy-related cognitive adverse effects, but also demonstrates the possible needs for further replications and investigations on interactions of systemic cytokines, inflammation, and cognitive functions associated with cancer and chemotherapy.