an activating signal (as ATP), which promotes the formation of the complex.

Methods: Organotypic slices were used to assess the interplay between inflammation and epilepsy. Slices were exposed to different concentrations of LPS (5, 10 and 20 ng/mL), either alone or in the presence of ATP (1 mM). LPS-induced inflammation was characterized using molecular-based assays, such as ELISA to quantify IL-1β, CBA to measure TNF-α, and western blot to assess the expression of Iba-1, GFAP, NLRP3/ASC, and αII-Spectrin. Field potential recordings were used to evaluate the epileptic-like activity of the slices and the effect of MCC950, a NLRP3 selective inhibitor, was assessed.

Results: Results obtained by ELISA showed a significant increase in IL-1β concentration in slices exposed to 10 ng/ml LPS/1 mM ATP. TNF-α, assessed by CBA, was also significantly increased in this condition, corroborating the inflammatory phenotype. No changes in NLRP3 expression were observed by immunoblot analysis, but ASC, one component of the inflammasome, showed a decreased expression in LPS/ATP exposed slices, suggestive of its binding to NLRP3 and thus to complex formation.

Furthermore, epileptic-like activity, measured by field potential recordings, was blocked by MCC950 (10 μM).

Conclusion: We demonstrate that LPS induces an inflammatory phenotype in organotypic slices. NLRP3 blockade eliminated the epileptic-like activity of the slices.

References

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PS048
The influence of antipsychotics therapy and sociodemographic characteristics on cognitive performances in acute phase of schizophrenia
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Aim: The main purpose of this research was to examine the influence of sociodemographic characteristics (gender, age, level of education, heredity, alcohol and psychoactive substances), and the effect of different therapies on cognitive capabilities of patients diagnosed with schizophrenia.

Introduction: Schizophrenia, as one of the most common psychiatric diseases, is characterized by generalized cognitive damage with various degrees and in all domains of cognitive functioning. Cognitive dysfunction is one of the main causes of poor social and professional functioning for patients with schizophrenia.

Methods: The research involved 50 patients with acute phases of schizophrenia from the Psychiatric Clinic in Novi Sad. The primary instrument for the research was the standardized test for examination of cognitive impairments, Mini-Mental Scale Examination (MMSE).

Results: Acquired data correlated with MMSE score, noting the degree of cognitive impairments in patients, particularly significant with relation to age and duration of illness. Gender, level of education and type of used antipsychotics were not significantly correlated with MMSE score.

Conclusion: During this research it is found that aging and longer illness duration bear significant correlation to higher levels of cognitive impairment.

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PS190
Voluntary inhibition of saccadic eye movements: EEG study
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