

This campaign is structured around two priority policy asks: the creation of a European Parliament Intergroup on Brain Health and Research and increased support to the creation of EU and National Brain plans. One year after the official kick-off, the campaign demonstrated that, when united, the brain community can reach a significant number of policymakers and make its voice heard to drive tangible policy changes.

The presentation “No Health Without Brain Health: Prioritising Brain Health in the European Union to Leave No One Behind” in this joint workshop will showcase success stories, address challenges and share good practices in EU-wide brain health initiatives. It will highlight the importance of collaboration and breaking down silos in preparing for the brain-healthy transition of our societies. Additionally, it will address the burden of brain disorders, neurological and mental alike, in a comprehensive and collaborative manner.

**Disclosure of Interest:** None Declared

## JS020

### Sleep and brain, physical and societal health

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doi: 10.1192/j.eurpsy.2025.79

**Abstract:** Sleep is essential for physical, brain (including mental) and societal health. Sleep-wake disorders are confirmed as independent risk factors and/or modulators of several neurological (such as stroke, dementia, and parkinsonism), psychiatric (depression) and other (arterial hypertension, diabetes, oncological) disorders. According to the Cost Of Illness in Neurology in Europe (COIN-EU) Study, 1.7 trillion euros cost is estimated for neurological disorders, of which 25.45% is dedicated for sleep disorders. In this talk both the socioeconomic burden of sleep disorders, and possible sleep-based interventions for improving brain and physical health, will be discussed.

**Disclosure of Interest:** None Declared

## JS021

### The Sleep Revolution – a model for other disease assessment and follow-up

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doi: 10.1192/j.eurpsy.2025.80

**Abstract:** In this talk, Dr. Arnardottir will summarize the main findings of the SLEEP REVOLUTION, an EU Horizon 2020 Research and Innovation Programme no. 965417. The project is an inter-disciplinary and international research and development project with 39 partner institutions and companies in Europe and Australia. SLEEP REVOLUTION aims to introduce an approach based on machine learning to assess sleep apnea severity and

treatment needs as well as the use of digital health technology to measure sleep and health (app, cognitive testing, consumer sleep technology and clinically validated sleep technology for home use). Through these technological solutions, the project brings together researchers, patients and healthcare professionals to provide beyond the current state-of-the-art diagnosis and optimal treatment for sleep disorders. The approach of this project can be used as a model for other disease assessment and follow-up.

**Disclosure of Interest:** E. Arnardóttir Consultant of: Medical Advisory Board for Philips (Feb 2022-Feb 2024) and Lille (Sept 2024), Speakers bureau of: Nox Medical, ResMed, Jazz Pharmaceuticals, Linde Healthcare, Apnimed, Wink Sleep, Vistor (Novo-Nordisk)

## JS022

### Sleep in Different Contexts: The Perspectives of European Psychology

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doi: 10.1192/j.eurpsy.2025.81

**Abstract:** Sleep is not something that occurs in isolation—it is embedded in a context. These contexts include biological, psychological and social factors, as well as a range of environmental considerations.

Throughout Europe psychologists engage in research and practice and collaborate with colleagues from allied professions such as psychiatry and those with lived experience on the topic of sleep. Insights are gathered from throughout the network of the European Federation of Psychologists' Associations (EFPA). Individual examples and emergent themes are identified from a wide range of contexts including:

The role of sleep in European policy

Sleep in times of crisis

Community-oriented approaches to supporting healthy sleep patterns

The role of sleep and rest in the workplace

How concern over topics like climate change affects sleep

Competency around sleep in practitioner training and standards

The implications of digitalisation on sleep

**Disclosure of Interest:** None Declared

## Core Symposium

### CRS001

#### Common pathways in the neurobiology of post-COVID conditions and of Mood Disorders

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**Abstract:** Mood disorders (MD) have been consistently associated with alterations in the immune system. Evidence suggests a condition of systemic low-grade inflammation with abnormally

decreased adaptive, increased innate immunity, and with higher levels of circulating cytokines, higher macrophage/monocyte inflammatory activation patterns, and higher neutrophils to lymphocyte counts. A dynamic pattern of premature immunosenescence and partial T cell defect starting early in adolescence, involving a reduction of naïve T cells and an expansion of memory and senescent T cells, parallels lifetime recurrence of illness episodes, worsening outcomes and fostering chronicity. Consistent systematic reviews and meta-analyses affirm that COVID-19 survivors show persistent psychopathology and neurocognitive impairment, with clinical significant depressive psychopathology being reported in around 31% of patients. Psychopathological features are the same observed in MD, along the same gradient of severity, and including a typically melancholic cognitive vulnerability. Neurocognitive impairment could possibly separate from depression in the long term, but not in the first year after infection, and it is largely overlapping with persistent cognitive deficits described in MD. We will discuss pathogenetic mechanisms shared by both, MD and post-COVID depression, with a specific emphasis on: (i) spread disruption of white matter microstructure, reduced grey matter volumes in anterior cingulate cortex, and abnormal functional connectivity in the cortico-limbic circuitries; (ii) abnormal cell trafficking across the blood brain barrier, essential for brain maintenance and repair in healthy conditions; (iii) altered immuno-inflammatory setpoints as observed in the peripheral blood, known to parallel white and grey matter abnormalities in the brain, and recently shown to disrupt neurovascular coupling and spontaneous neural activity. We suggest that post viral depression provides an invaluable model illness for the study of immune-inflammatory mechanisms involved in the pathogenesis of mood disorders, to identify new targets for treatment, with the aim of restoring mental health and brain homeostasis.

**Disclosure of Interest:** None Declared

## CRS002

### The Lancet Psychiatry Commission on Transforming Mental Health Implementation Research

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doi: 10.1192/j.eurpsy.2025.43

**Abstract:** Effective approaches exist to prevent and treat mental illness and to promote mental health but most people who could benefit from evidence-based interventions (policies, programmes, and individual-level practices or services) do not receive them. Too often, research produces interventions and implementation strategies that are difficult to scale owing to misalignment with the political, cultural, policy, system, community, provider, and individual realities of real-world settings. The *Lancet Psychiatry* Commission on Transforming Mental Health Implementation Research considers strategies for changing how research is done to produce more actionable evidence. It examines how to integrate research and real-world implementation; centre equity in mental health intervention and implementation research; apply a complexity science lens to mental health research; expand designs beyond the randomised clinical trial; and value transdisciplinarity across

endeavours. Most mental health implementation research has been done in high-income countries but the Commission's recommendations incorporate research from low-income and middle-income countries and call for strategies to expand mental health implementation research globally.

**Disclosure of Interest:** J. Marsh Employee of: Elsevier

## CRS003

### Implementation of Psychosocial treatments – who's choice and who's recovery?

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doi: 10.1192/j.eurpsy.2025.44

**Abstract:** Psychosocial interventions play a role in recovery and in the patient's journey. Recovery is individual and so needs individual responses from the mental health services with individual goals set. Different interventions will be useful at different stages and, of course, they only "work" for some people. Three main strategies are often referred to – reducing symptoms, reducing barriers to recovery, and extending and maintaining recovery to achieve some stable and acceptable (to the patient) optimal level of functioning. Psychosocial intervention strategies are beneficial for each of these, and they are often thought of as independent, but they are inter-related with one type of therapy leading to reductions in the need for other therapies. Even though many of these strategies are included in guidelines, the process of considering which one to start with is a choice. We need to work out how that choice is made.

**Disclosure of Interest:** None Declared

## CRS004

### Cannabis and psychosis: from the population attributable fraction to the importance of gender differences

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doi: 10.1192/j.eurpsy.2025.45

**Abstract:** I will present data from a range of Danish studies on both cannabis-induced psychosis and Danish epidemiological studies on the association between cannabis and psychotic disorders such as schizophrenia. A deeper understanding of these associations is important. If the consistent association that we have observed for many decades is indeed causal, then cannabis is perhaps the single most important preventable risk factor for schizophrenia that we have identified to date. The development over time of the