hippocampal volume, have been observed in LLD, although results are inconsistent. Vascular lesions are more consistently associated with LLD and may constitute factors of poor prognosis. More recent MRI modalities, including fMRI and DTI, also show interesting results, notably to assess treatment response in LLD. Molecular Imaging also has the potential to improve our understanding of the pathophysiology of LLD, using imaging such as PET-FDG and Amyloid PET. Finally, there are emerging studies with novel neuroimaging modalities such as Ultrasound to measure subtle mechanical properties in the brain of patients with LLD. Finally, we contend that neuroimaging has the potential to provide markers for the identification of subcategories of LLD (vascular depression, amyloid depression, etc.) as well as prognostic values and markers for treatment response.

Disclosure of Interest: None Declared

S0020

Comorbidity between physical illness, infection diseases and mental disorders

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Abstract: A paradox of the modern world is represented by the increasing rate of comorbidities, although the life expectancy is increasing worldwide, the number of disease-free years is not improving consequently. Physical comorbidities are often overlooked in people with severe mental disorders, although this problem needs to be adequately managed since it is associated with a worse quality of life and a poorer personal and social functioning. In particular, in people with severe mental disorders is very common the contemporary presence of infectious diseases (mainly TBC and HIV) and other physical conditions, which worsen the long-term prognosis.

Disclosure of Interest: None Declared

S0021

Novel pharmacological treatment options for people with eating disorders

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Abstract: The current scientific literature has increased our understanding of how medication could be beneficial for patients with eating disorders (EDs) on a molecular, functional, and behavioural level. Based on theoretical considerations about neurotransmitters, hormones and neural circuits, possible drug targets for the treatment of EDs may include signal molecules and receptors of the self-regulatory system such as serotonin, norepinephrine and glutamate; the hedonic system including opioids, cannabinoids and dopamine; and the hypothalamic homeostatic system including histamine, ghrelin, leptin, and insulin.

The currently approved pharmacological treatments for EDs are limited to fluoxetine for bulimia nervosa (BN) and - in some countries – lisdexamfetamine (LDX) for binge eating disorder (BED). Topiramate might be an additional option for people with BN and BED.

There are no approved pharmacological options for anorexia nervosa (AN), even though study results for olanzapine and dronabinol are promising. Psilocybin, ketamine, and metreleptin have recently been considered and tried in AN.

Case reports and studies regarding the drug treatment of the new DSM-5 EDs include the use of mirtazapine for avoidant restrictive food intake disorder (ARFID); fluoxetine for pica; and levosulpiride and baclofen for rumination disorder.

This talk is based on a comprehensive review of the scientific literature regarding the pharmacological treatment for EDs and will include a preview of the 2023 update of the World Federation of Societies of Biological Psychiatry (WFSBP) guidelines for the pharmacological treatment of eating disorders.

Disclosure of Interest: None Declared

S0022

High impact psychiatric publishing – gender parity within reach?

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Abstract: Andrea Gmeiner[1], Melanie Trimmel[1], Amy Gaglia[1,2], Beate Schrank[3], Stefanie Süßenbacher-Kessler[1], Michaela Amering[1]

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Gender parity, authorship, geographic and subject matter diversity are declared goals in the academic publishing world. Recent data on the progress towards these goals suggest that changes and a shift towards diversity have been happening over the last decades. Examples include significantly increasing numbers of female first and senior authors between 2008 and 2018 (Hart et al, 2019) over a wide range of journals. Our own data on trends in three high-impact psychiatric journals over a 25-year time period from 1994 until 2019 suggest that female first, female senior, and female overall authorship have increased significantly over the quarter of a century covered. Results do indicate that gender parity in first authorship was reached in the category of original research articles for the first time in 2019 (Gmeiner et al, 2022). However, data also showed the remaining underrepresentation of women in senior authorship positions in line with the *leaky pipeline* phenomenon. Gender differences in publication trends with regards to subject matters and topics in the 2004/14/19 part of this sample showed the percentage of female first authors exceeding 50% in the two most frequent subject matters 'basic biological research' and 'psychosocial epidemiology' in 2019 (Trimmel et al, submitted for publication). Although the percentage of female first authors in the three most common target populations under study (mood disorders, schizophrenia, general mental health) increased from 2004 to 2019, gender equality has not yet been achieved in these fields. Consistent

monitoring of publication trends and gender distribution by researchers and academic journals needs to identify and counteract the areas of underrepresentation of women.

Hart, K. L., Frangou, S., & Perlis, R. H. (2019). Gender Trends in Authorship in Psychiatry Journals From 2008 to 2018. *Biological psychiatry*, *86*(8), 639–646.; Gmeiner A, Trimmel M, Gaglia-Essletzbichler A, Schrank B, Süßenbacher-Kessler S, Amering M, (2022). Diversity in high-impact psychiatric publishing: gender parity within reach? *Archives of women's mental health*, *25*(2), 327–333.

Disclosure of Interest: None Declared

S0023

How to fix the leaky pipeline in Academic Psychiatry

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Abstract: The leaky pipeline is a visual metaphor for the under-representation of women in leadership positions in Academic Psychiatry despite their over-representation in medical schools, residency programs, and junior academic positions. The presentation focuses on the key obstacles that pertain to personal and societal attitudes and institutional barriers and proposes empirically tested and pragmatic solutions.

Disclosure of Interest: None Declared

S0024

2. Case scenarios 1: Trauma based approach: from instability to stability

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doi: 10.1192/j.eurpsy.2023.61

Abstract: This presentation is titled " Case scenarios 1: Trauma based approach: from instability to stability". You will be given a case based oriented insight into the relationship between substance use disorder and forced displacement and treatment options that are based upon the trauma some has been experienced. A focus will be on factors that contribute on psychological stability in extreme situations. Thus you will be presented preliminary results of our ongoing study funded by the Heidelberg Academy of Sciences and Humanities that dedicated to the question of how mental stability and health-related quality of life of individuals change over time.

Disclosure of Interest: None Declared

S0025

Mentoring for improving gender equality in academic psychiatry

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Abstract: Although in many countries in the meantime more women than men choose medicine and later psychiatry for their training, key positions in hospitals and research are still mainly held by men. The professional career of women is impeded not only by institutional, but also by psychological barriers such as gender role behavior and gender role stereotypes. Mentoring can help young women to overcome these barriers.

But usually mentoring starts too late. As studies have shown, important decisions about future career steps are taken already towards the end of medical studies. Therefore, gender sensitive teaching and mentoring should start already at university and should not only address young women, but also young men as potential partners and future colleagues - especially regarding their gender role behavior and stereotypes. Mentoring programs considering gender-specific needs should be implemented in the regular teaching during medical studies and in psychiatric training.

Furthermore, women should be coached during their further career steps since there is not only a "glass ceiling" that excludes young women from achieving leadership roles. When they finally have achieved such a role, women often face further difficulties stemming from gender stereotypes and traditional gender roles.

University teachers and employers should be addressed, as well as politicians. Otherwise, psychiatry not only loses a great potential of talents, but might also miss the chance of reforms towards a more gender-sensitive psychiatry and psychotherapy.

Disclosure of Interest: None Declared

S0026

Framing substance use disorders among forcibly displaced people through a syndemics lens.

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Abstract: Syndemics are synergistically interacting epidemics (for example, the epidemics of substance use disorders and forced displacement) in a particular context with shared drivers such as pre-existing political, structural, social and health conditions. Policymakers may ask what the risks of and needs are for forcibly displaced people with regards to substance use disorder (SUD). Working from a syndemics framework, we would argue that multiple risk and resiliency factors relating to both forced displacement and SUD work synergistically, and impact more significantly upon some populations than others. These risk factors include structural inequality and racism, social deprivation, violence, homelessness, trauma, childhood adversity, and co-morbid physical and mental