

EPP543

Examination of Theory of Mind, Cognitive Functions and Acute Period Clinical Features in Patients Diagnosed With Substance Use-Related Psychotic Disorder

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Introduction: There are recent studies examining the cognitive functions, depressive symptoms, social cognitive characteristics (Terms of Theory of Mind) and acute symptoms of patients with substance-induced psychosis, as well as varying effects of different substances on development of psychosis (Beckmann et al. Child Adolesc Psychiatr CNA.2020;131-143).

Objectives: It was aimed to examine sociodemographic characteristics, clinical symptoms in acute psychotic period, cognitive functions, social cognition characteristics of hospitalized patients diagnosed with substance related psychosis; compare the severity of clinical symptoms, improvement in acute period symptoms with treatment, cognitive functions and social cognitions according to substance (methamphetamine, cannabis, polydrug).

Methods: 34 hospitalized patients in acute psychotic episode diagnosed with Substance-Induced Psychosis according to DSM-5 were included in study. Socidemographic Data Form, Reading the Mind in the Eyes Test, Stroop Test, Calgary Schizophrenia Depression Scale and every 3 days during the treatment PANSS (Positive Negative Syndrome Scale) were administered.

Statistical analyses done with R program. Kruskal-Wallis test was used to compare numerical variables between groups. For the significant differences between groups, Bonferroni correction was applied in post hoc analyses. P-value of less than 0.05 was considered statistically significant for all analyses. Chi-square test was used to analyze categorical variables.

Results: It was determined that drug-induced psychosis patients were mostly male, unemployed, young adults, started using drugs before the age of 18, lived in irregular urban areas. Methamphetamine, cannabis and polydrug-related psychosis were compared; There was no difference in cognitive functions and social cognition characteristics between all groups. At the end of treatment, it was observed that the rate of improvement in positive and negative symptoms and the decrease in PANSS scores were greatest in methamphetamine group, there was no difference between cannabis and polydrug groups. We found that PANSS and negative symptom severity before starting treatment were not different between methamphetamine and cannabis, and initial positive symptoms were more severe in methamphetamine than cannabis.

Conclusions: Methamphetamine group showed greater improvements in positive and negative symptoms and total PANSS scores compared to cannabis and polydrug. The fact that there was less improvement in cannabis group than in methamphetamine group supports the data in the literature identifying the relationship between cannabis and chronic psychosis (D'Souza et al, The World Journal of BP, 2022, 719-742).

No difference was found between social cognitions and cognitive functions of 3 groups.

Keywords: Drug Induced Psychosis, Methamphetamine, Cannabis, Theory of Mind.

Disclosure of Interest: None Declared

Bipolar Disorders

EPP546

Pregnancy and reproductive health in women with bipolar disorder at the Arrazi Psychiatric University Hospital in Salé

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Introduction: Bipolar disorder, like other severe mental illnesses, is considered to be a condition with an increased risk of unsafe sexual practices [1]. Unsafe sex in bipolar disorder has been empirically linked to manic episodes due to symptoms of hypersexuality, cognitive impairment and substance and alcohol abuse.

Unprotected sex poses health risks for both sexes in terms of sexually transmitted diseases, but for women it also means a risk of unplanned pregnancy. Unplanned pregnancies can have negative consequences for the health, social and psychological lives of women and children [2].

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Objectives: To assess reproductive health and unplanned pregnancies in patients with bipolar disorder followed and hospitalised at the Arrazi psychiatric hospital in Salé.

Methods: This was a descriptive cross-sectional study using a questionnaire including sociodemographic and clinical criteria as well as questions on the sex life of patients with bipolar disorder type I or II, questions on contraception, and on pregnancies and their outcomes. Inclusion criteria: women with bipolar disorder type I or II.

Exclusion criteria: psychosis, intellectual disability.

Results: The average age of the participants was 33 years. 68% were married and 57% had children. The majority were unemployed (87%). 85% had a substance use disorder. 61% had type I bipolar disorder and 44% were hospitalised, with the remainder receiving outpatient treatment. Almost all the patients were sexually active at the time of the study, and 88% had only one sexual partner. 77% were using contraception, mainly the pill. The average age of first pregnancy was 22 years. 66% of pregnancies were unplanned. 89% gave birth and 11% had abortions.

Conclusions: Bipolar disorder, like other serious mental illnesses, is considered to be a condition with an increased risk of unsafe sexual practices. Female patients with bipolar disorder have an early age of onset of sexual activity. This leads to frequent unplanned pregnancies. These unplanned pregnancies can have negative consequences for the health, social and psychological life of women and children. Clinicians must be aware of reproductive health and take steps to improve access to family planning when treating young women with bipolar disorder, in order to avoid negative consequences.

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