

ill, and marginalized communities, are at greater risk because of their limited coping resources and increased exposure to the impacts of climate change.

Conclusions: The effects of climate change can be direct or indirect, short-term or long-term, with a growing body of evidence showing its contribution to a wide range of psychological disorders. Policy-makers and mental health professionals must consider mental health in climate adaptation strategies and create support systems for affected populations. The European Psychiatric Association (EPA) has recently published a position paper urging the inclusion of mental health considerations in climate strategies. Nevertheless, more research is needed to document the extent of these impacts and the best options for mitigating and treating them.

Disclosure of Interest: None Declared

EPV0409

Do pollutants and meteorological factors trigger more psychiatry admissions?

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Introduction: The high prevalence of mental health disorders makes investigating their etiology a fundamental activity. Factors influencing their physiology include genetic predisposition, substance use, environmental factors, etc. Among these, weather and atmospheric pollutants are two of the least studied. The biologically active agents in the atmosphere interact with living beings, disrupting their homeostasis and leading to alterations in both physical and mental health. This interaction was already noted in the Corpus Hippocraticum in the 4th century BC.

Objectives: The objective is to analyze the impact of various environmental factors and atmospheric pollutants on daily emergency hospital admissions for mental disorders in the healthcare area of the province of León from 2011 to 2022.

Methods: An observational, retrospective, ecological, longitudinal, and time series study is conducted. Admission data is sourced from the coding office at the Complejo Asistencial Universitario de León, meteorological data from the Agencia Estatal de Meteorología, and pollutant data from the Junta de Castilla y León. A combined database in Excel is created for statistical analysis, both descriptive and analytical (Poisson regression), using the SPSS statistical package.

Results: It was observed that hospital admissions for mental disorders are significantly related to sunlight hours, ozone, precipitation, average wind speed, CO, NO₂, maximum atmospheric pressure, NO, and PM10.

Conclusions: The findings of this study show that meteorological factors and atmospheric pollutants are related to hospital admissions for mental disorders. Applying this information in psychiatric emergencies could improve forecasting and resource management during periods of higher demand.

Disclosure of Interest: None Declared

Comorbidity/Dual Pathologies

EPV0412

Co-existence of Autism Spectrum Disorder (ASD) traits in an Irish sample of adults diagnosed with ADHD. Longitudinal outcomes.

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Introduction: Autism Spectrum Disorder (ASD) and ADHD are both neurodevelopmental disorders which share genetic heritability and often coexist in adults diagnosed with ADHD and vice versa. Despite the overlap between the two disorders there are enough phenomenological differences to indicate that these conditions are sufficiently distinct

Objectives: To estimate the coexistence of ASD traits in an adult sample diagnosed with ADHD; to compare those screening positive for possible ASD to those scoring negative, in terms of functionality, quality life and clinical outcomes; to explore the effects of ADHD medication in three main outcomes (clinical, quality of life, and functionality) in those with only ADHD and in those with a coexistence of ASD and ADHD.

Methods: Prospective longitudinal study of an adult sample diagnosed with ADHD. Data collected on age, gender, medications and on scales: Autism Spectrum Quotient (AQ-10); Adult ADHD Clinical Outcome Scale (ACOS); Adult ADHD Quality of Life Questionnaire (AAQoL); Weiss Functional Impairment Rating Scale (WFIRS).

Results: Sample of 165 participants was recruited. The AQ-10 showed that n=74 (44.8%) of the participants had traits of ASD. Longitudinal analyses demonstrated that people with ADHD and ASD traits have worse clinical outcomes, quality of life, social skills and family functioning compared to those with ADHD only. The effects of ADHD medications (stimulants, atomoxetine) were significant in the three examined outcomes across the time but no significant effects of medications to those with ASD traits was found.

Conclusions: High coexistence of ADHD and ASD traits. Perhaps lesser if clinical diagnosis for ASD was performed. Medications for ADHD did not improve those with ADHD and ASD traits. Service implications (for local services): neurodevelopmental clinics is necessity now and not only special for ADHD, where adults with ADHD and ASD can be diagnosed and treated accordingly.

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EPV0413

A possible explanation for resistance in schizophrenia

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