European Psychiatry S1005

Methods: The study involved 98 women 16 to 25 years (20.9 \pm 5.14 years) with depression within the framework of various nosologies (F31.3-4; F33.0-1; F60.0-9; F21.3-4; F20.01-2; F25.1). Two groups of patients without a history of psychosis were identified: group 1 (n = 47) - without symptoms of psychosis risk, group 2 (n = 51) - with depression associated with psychopathological symptoms of psychosis risk. The control group consisted of 42 healthy women of the corresponding age. The severity of depressive symptoms was assessed using the HDRS-21, the severity of negative and positive symptoms was determined using the SANS and SAPS. In group 2, the severity of attenuated positive symptoms was determined using the SOPS. The activity of the leukocyte elastase (LE) and α1-proteinase inhibitor (α1-PI), as well as the level of autoantibodies (AB) to S100B and MBP, were determined in plasma.

Results: The groups were characterized by a statistically significant increase in both LE and α 1-PI (p<0.05), and the level of AB compared to the control (p<0.05), but no significant differences were found. In group 1, clinical and biological correlations were found between LE activity and the total score on the SANS (r=0,44, p=0.002). In group 2, a negative correlation was found between LE activity and the age of onset of the disease (r=-0.3, p=0.046).

The clustering of patients by LE activity and their distribution by immunological groups showed that 29.4% and 27.5% of patients in groups 1 and 2, respectively, were characterized by a high level of inflammatory markers and the absence of an autoimmune component to neuroantigens, which is a sign of a more favorable course of the pathological process. On the contrary, 70.6% and 72.5% of patients in groups 1 and 2, respectively, were characterized by the type of inflammatory response associated with an increase in the level of AB and varying degrees of insufficiency of the functional activity of neutrophils, which is considered an unfavorable factor that aggravates the course of the disease.

Conclusions: Comparison of the spectrum of inflammatory markers in juvenile depression with different risk of developing psychosis indicate their significant immunological heterogeneity. The immunotype characterized by a high level of AB and insufficient LE activity can presumably be considered as a predictor of the risk of developing psychosis.

Disclosure of Interest: None Declared

EPV1525

Quantitative and functional characteristics of monocytes and neutrophils in patients with treatmentresistant schizophrenia

S. Zozulya 1* , Z. Sarmanova 1 , I. Otman 1 , V. Kaleda 1 and D. Tikhonov 1

¹FSBSI "Mental Health Research Centre", Moscow, Russian Federation *Corresponding author.

doi: 10.1192/j.eurpsy.2025.2039

Introduction: Despite significant progress in the treatment of schizophrenia, the number of patients with schizophrenia who do not respond to treatment remains constant. Identification of biomarkers of therapeutic resistance in the schizophrenia can help in early prediction of these conditions, as well as in the development of new approaches to treatment. Inflammation is considered as one of the possible mechanisms involved in the development of the pathological process in the formation of resistance to therapy in schizophrenia. The main cells of innate immunity, neutrophils and

monocytes, are involved in the implementation of the inflammatory response.

Objectives: To compare the subpopulation composition of monocytes and the level of other inflammatory markers in patients with treatment-resistant schizophrenia and in the control group.

Methods: The study included 17 men with treatment-resistant schizophrenia (TRS) (27.0±8.0 years) and 15 healthy individuals without signs of mental and inflammatory diseases. The relative content of neutrophils and monocytes in the blood, as well as the ratio of monocyte subpopulations, estimated by the expression level of CD14 and CD16 receptors, were determined by flow cytofluorometry. The functional activity of neutrophils was determined spectrophotometrically by the activity of leukocyte elastase in plasma. The level of autoantibodies to S100B in plasma was estimated by ELISA.

Results: A significant increase in the relative content of monocytes (U=28.0, p<0.01) and a decrease in neutrophils (U=35.0, p=0.036)were found in TRS patients compared to the controls. An increase in a proportion of the "transitional" CD14+CD16- subpopulation (U=61.5, p=0.04) and a decrease in the "classical" CD14++CD16subpopulation (U=60.5, p=0.036) were accompanied by the proportion of "intermediate" inflammatory CD14++CD16+ and "nonclassical" CD14+CD16+ subpopulations that did not differ from controls. A moderate increase in leukocyte elastase activity (U=34.0, p=0.001) and a high level of S100B autoantibodies (U = 55.0, p = 0.02) were found in blood plasma of patients. The proportion of "intermediate" CD14++CD16+ monocytes was negatively correlated with the level of autoantibodies to S100B (r=-0.55, p=0.021). It should be noted that this spectrum of immune parameters differs from the corresponding profile that we identified in patients with schizophrenia who responded to treatment. The main differences concern the proportion of "intermediate" monocytes, the relative content and functional activity of neutrophils.

Conclusions: The identified quantitative and functional characteristics of monocytes and neutrophils in patients with TRS indicate the possible involvement of the cellular component of immunity in the development of resistance to treatment and may be associated with the severity of the disease in a long-term pathological process in the brain.

Disclosure of Interest: None Declared

Psychopathology

EPV1526

Distinguishing Obsessive-Compulsive Symptoms in Schizophrenia-Spectrum Disorders and Obsessive-Compulsive Disorder: The Role of Basic Self Disturbances

V. Alves Barata¹*, J. Bastos¹ and T. Filipe Ferreira¹

¹Hospital Prof. Doutor Fernando Fonseca, Lisbon, Portugal *Corresponding author.

doi: 10.1192/j.eurpsy.2025.2040

Introduction: Obsessive-compulsive symptoms (OCS) are frequently observed in both obsessive-compulsive disorder (OCD) and schizophrenia-spectrum disorders (SSD), creating significant diagnostic challenges. Historically, Karl Jaspers defined "true obsessions" as a struggle against intrusive ideas that appear nonsensical and "alien" to the personality, demarcating this concept from delusions and overvalued ideas, in which cases the person