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Introduction: Depression treatment recommendations seldom include chronic illness comorbidity.

Objectives: To describe the rationale and methods for a cluster-randomized trial (CRT) in primary care clinics (PCC) comparing a computer-assisted psychoeducational (CAPE) intervention to usual care (UC) for depressed patients with hypertension or diabetes.

Methods: Two-arm, single-blind CRT in Santiago, Chile. Eight PCC will be randomly assigned to the intervention or UC. A total of 360 depressed individuals aged 18 or older PHQ-9 scores ≥ 15 and hypertension or diabetes will be recruited. Patients with alcohol/substance abuse; current treatment for depression, bipolar disorder, or psychosis; illiteracy; severe impairment; and residents in long-term care facilities will be excluded. Patients in the intervention will receive eight CAPE sessions by trained therapists, structured telephone calls to track progress, and usual medical care for chronic diseases. Psychologists and psychiatrists will regularly supervise therapists. To ensure continuity of care, the PCC team will meet monthly with a research team member. Patients in UC will receive standard medical and depression treatment. Three, six, and twelve months after enrollment, outcomes will be assessed. The primary outcome will be a 50% reduction in baseline PHQ-9 scores at six months. Intention-to-treat analyses will be used.

Results: A previous, small-scale pilot study provided valuable insights for study design.

Conclusions: This study will provide first-hand evidence on the effectiveness of a CAPE for depressed patients with chronic diseases at PCC in a Latin American country.

Disclosure: No significant relationships.

Keywords: Chronic Diseases; e-mental health; Depression; Primary health care

EPP0521

Use of Lamotrigine in the pharmacological management of a lady with longstanding history of Trichotillomania

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Introduction: Trichotillomania is characterized by recurrent pulling of one's hair despite attempts of stopping, resulting in hair loss. Previously classified as impulse control disorder, it is now considered an obsessive-compulsive related disorder in DSM-5. First-line therapy is cognitive behavioural therapy (CBT), with strong support for habit reversal training. For pharmacological therapy, selective serotonin reuptake inhibitors (SSRIs) are commonly prescribed. Clomipramine has been used but is limited by its side effect

profile. Many patients continue to experience distressing symptoms despite current treatment methods.

Objectives: Lamotrigine, an anticonvulsant medication, is frequently utilized by psychiatrists to treat conditions like Bipolar Disorder. However, its utility in treating Trichotillomania has not been explored. We are interested to find out if it could benefit patients who have not responded adequately to current available treatment.

Methods: We report a case of a lady suffering from Trichotillomania for many years with limited improvement despite active treatment. We follow her progress after being started on Lamotrigine for six months.

Results: In our case, a lady with longstanding Trichotillomania has previously been treated with SSRIs and Clomipramine with limited response. An incidental trial of Lamotrigine after stopping her other medications has led to sustained improvement and stabilization of her condition. A possible hypothesis on how Lamotrigine's mode of action could have led to this improvement will be explored in this paper.

Conclusions: This case illustrates the potential of Lamotrigine to treat Trichotillomania in someone who has not responded adequately to usual treatment and could be an area worth looking into for future research.

Disclosure: No significant relationships.

Keywords: Trichotillomania; Lamotrigine

EPP0522

Prevalence of Body Dysmorphic Disorder Among Saudi Female Patients Seeking Cosmetic Procedures

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Introduction: Body dysmorphic disorder (BDD) is a psychiatric illness in which the patients seeking cosmetic surgery are usually unsatisfied with the outcomes of the surgery. Therefore, it is essential to study this phenomenon and increase awareness among physicians to assess for the presence of BDD before any cosmetic treatment.

Objectives: To assess the presence of BDD among female patients undergoing cosmetic procedures and improve awareness among providers of cosmetic treatment.

Methods: This cross-sectional study uses the adult version of the BDD modification of the Y-BOCS (BDD-YBOCS) scale. It consists of 12 items related to preoccupied thoughts that participants have about their appearance and the effects that these thoughts have on their lives. Questionnaires were distributed on different online platforms among females living in the eastern province of Saudi Arabia.

Results: Out of the 220 women who participated, 45 had BDD (prevalence rate of 20.5%), a significant and worrying percentage. The result indicates more among participants in the age group of 20–35 years. Also, it revealed positive correlation exists between BDD and females seeking cosmetic procedures.

Conclusions: One-fifth of the participants were diagnosed to be suffering from BDD. Higher rates were observed among women

who underwent cosmetic procedures. Therefore, we recommend physicians conduct screening for patients seeking cosmetic procedures before starting any treatment.

Disclosure: No significant relationships.

Keywords: Eastern Province; Saudi Arabia; Body Dysmorphic Disorder; cosmetic procedures

EPP0524

Refractory obsessive-compulsive disorder: a challenging treatment

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Introduction: Obsessive-compulsive disorder (OCD) is a chronic and impairing condition included in the DSM-5 Obsessive-Compulsive Spectrum Disorders. Despite psychopharmacological and psychotherapeutic measures, there are patients who remain refractory to different therapeutic strategies.

Objectives: The authors aim to present different alternatives in approach, treatment and management of refractory OCD, based on a review of the existing literature.

Methods: Analysis of the data about this subject, considering the review articles and the case reports published at current time and highlighting the most essential topics, concerning the latest developments in the area.

Results: Therapeutic options are presented, including transcranial direct current stimulation (tDCS), repetitive transcranial magnetic stimulation (rTMS), deep brain stimulation (DBS) and ablative neurosurgery.

Conclusions: The treatment of OCD represents a great challenge in clinical practice. Despite the advances accomplished by a more extensive knowledge of the disease and a burden of new techniques in the last decades, more treatment strategies are needed, especially for patients with non-response to conventional treatment.

Disclosure: No significant relationships.

Keywords: Deep brain stimulation; transcranial direct current stimulation; obsessive-compulsive disorder; repetitive transcranial magnetic stimulation

EPP0526

Inflammatory Markers in Obsessive-Compulsive Disorder: A Systematic Review and Meta-Analysis

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Introduction: A growing number of studies have examined the link between inflammatory markers (IM) and the pathophysiology of

obsessive-compulsive disorder (OCD). However, this association has yet to be fully identified.

Objectives: This review aims to systematically evaluate evidence from studies examining peripheral IM in adult participants with OCD compared to controls. IM included: CRP, TNFa, IFN γ , IL1/4/6/10.

Methods: Databases used for literature searching: Medline, Embase, PsycINFO (until October 2021). Studies that examined IM in the blood of adult OCD and control groups were included. Screening and data extraction adhered to PRISMA guideline standards. The quality assessment utilised funnel plots and the approach developed by Hawker et al. 2002. A random-effects meta-analysis model was adopted. PROSPERO reference number: CRD42021284766.

Results: The systematic review (19 studies, 1,225 participants) and meta-analysis (12 studies, 796 participants) had an average quality assessment score of 28.3 (medium quality) and 30.7 (high quality), respectively. The average heterogeneity of each IM analysed was 76.6%. Totalled, each study and IM analysis showed more insignificant differences (n=35) than significant differences (n=25). The meta-analysis revealed no significant difference for overall IM assessments. However, a sub-analysis of IL6 (excluding studies using serum or lipopolysaccharide stimulation) found significantly lower levels of IL6 within the OCD group (effect size: 3.98 and 95% CI: 0.43,7.53).

Conclusions: This is an up-to-date systematic review examining IM in OCD. Insignificant results found may have resulted from the relatively high heterogeneity or varied study designs. One sub-analysis of IL6 identified an association, although further studies are required with larger sample sizes and fewer disparities.

Disclosure: No significant relationships.

Keywords: inflammatory markers; systematic review; psychiatry; obsessive-compulsive disorder

EPP0528

Efficacy of Synchronous Remote-Based Interventions for Suicide Prevention among Adolescent and Adult Patients: A Systematic Review and Meta-Analysis

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Introduction: Suicide is a universal, complex, and multifaceted public health problem that is among the leading causes of