

O023

Personal autonomy and hopelessness are associated with antidepressant drugs prescription in currently euthymic bipolar patients

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Introduction: The patterns and clinical correlates related to antidepressant drugs (ADs) prescription for BD remain poorly understood.

Objectives: This study aimed to compare socio-demographic and clinical features of BD patients treated vs. not treated with ADs.

Methods: The sample consists of 287 currently euthymic bipolar patients. Among participants (mean age=51.9±15.02), 157 (40.1%) were receiving ADs.

Results: Based on the main findings, subjects given ADs were older and more frequently retired than those without receiving ADs. Moreover, patients given ADs were more likely to have had a first major depressive episode and present with psychotic symptoms at illness onset. Lifetime substance abuse/dependence history was less frequently reported among patients given ADs. Furthermore, ADs given patients have a higher number of affective episodes, and longer duration of their illness. Additionally, subjects treated with ADs reported higher hopelessness levels, and lower positive reinterpretations than those who were not treated with ADs. Factors associated with ADs-use by multivariate modeling were reduced personal autonomy (OR=.070), and hopelessness levels (OR=1.391).

Conclusions: These results may help clinicians to better understand the clinical correlates of BD subtypes and improve their differential management. Additional studies are needed to replicate these findings, and facilitate the differential trajectories of BD patients based on socio-demographic/clinical profile.

Disclosure: No significant relationships.

Keywords: Coping Strategies; Hopelessness; antidepressant medications; bipolar disorder

O022

Cognitive function and metabolic syndrome in unipolar and bipolar depression: A pilot study

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Introduction: Cognitive function is impaired in depressive disorders. Among several factors implicated in regulation of the cognitive function, metabolic syndrome has been showed have a pivotal role cognitive functioning in healthy controls. However, the role of metabolic syndrome in regulating the cognitive functioning of subjects affected by depressive disorders is little studied.

Objectives: To investigate the effect of metabolic syndrome in regulation of cognition in unipolar and bipolar depression.

Methods: One-hundred-sixty-five people affected by a depressive disorder (unipolar depression, UP; bipolar depression, BP) were enrolled at the Psychiatric and Clinic Psychology Unit of the University of Rome Tor Vergata, Rome, Italy. A group of healthy controls (HC) matched for gender and age was enrolled. The cognitive functions were evaluated with a computerized tool, THINC-it.

Results: UP and BP had lower performances in THINC-it cognitive domains than HC. Metabolic syndrome is a negative, independent predictor of low performance in the THINC-it cognitive domains of people with depressive disorders.

Conclusions: Our findings confirm that metabolic syndrome has a prominent role in determining the cognitive efficiency in depressive disorders, independently by the presence of a unipolar or bipolar depressive disorder. Metabolic syndrome has to be considered a major factor that should be considered in the treatment strategies of cognitive functioning improvement of people affected by depressive disorders.

Disclosure: No significant relationships.

Keywords: Metabolic syndrome; cognitive function; bipolar disorder; major depressive disorder

O023

Bipolar mania with psychosis vs without psychosis: A clinical characterization with indirect measures of severity

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Introduction: The presence of psychotic symptoms is highest during acute episodes of bipolar mania. There is no evidence base regarding the implications of psychosis in the prognosis of bipolar disorder, despite common assumption that their occurrence reflects greater disease severity.

Objectives: We aim to compare sociodemographic and clinical characteristics of inpatients admitted for bipolar mania with and without psychotic features.

Methods: Retrospective observational study of inpatients admitted between January 1st 2017 and 31 October 2020 in a psychiatry inpatient unit of a tertiary hospital. Descriptive analysis of the results was performed using the SPSS software, version 26.0.

Results: Between 2017 and October 2020 there were 103 admissions due to mania bipolar I disorder, 53.4% (n=55) with psychotic symptoms. When compared with mania without psychosis, psychotic mania was associated to male gender (71.1% to 39.7%; $\chi^2(1, N = 103) = 10.06$; $p = 0.02$) and younger age ($t(103) = -2.43$; $p = 0.017$). The proportion of compulsory admissions and average length of stay were similar between mania with psychosis and

mania without psychosis. Also, having a manic bipolar episode with psychotic symptoms was not associated to being prescribed a long-acting injectable antipsychotic.

Conclusions: The presence of psychotic symptoms in bipolar manic episodes were associated to male gender and younger age but not to indirect measures of illness severity.

Disclosure: No significant relationships.

Keywords: bipolar disorder; mania; psychotic symptoms; severity

O025

Correlation between hand functioning, cognition and quality of life of CP children: 2-year prospective randomized study

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Introduction: For treatment of CP patients multidisciplinary approach is often promoted. But it is not cost-efficient to involve all medical staff and variety of diagnostic/intervention tools for every patient.

Objectives: Having knowledge on pivotal manifestations of CP and what are they related to would ease multidirectional approach in practice. It will shorten a search of pathologies only to those related to main manifestations related to quality of life.

Methods: 611 children aged 2 to 18 years (mean age=6y5m) with CP (G80.0-G80.9): examined by 3 independent doctors. 56%males, 44% females. Randomized blinded assessment. Fine hand function assessed by "9-hole peg", "Box and Blocks" tests, dynamometry. Intellectual functioning assessment was done using Raven Matrices. Quality of Life(QoL) assessment according to Caregiver Priorities and Child Health Index of Life with Disabilities (CPCHILD). The intraclass correlation coefficient(ICC) was used for finding out discrepancies between observers. Inferential statistics including 95%CI and P-value. **Results:** ICC coefficient between observers was highly reliable=0.93 (95%CI:0.89–0.95). The mean QoL score for children GMFCS levels I and II was 58.5(SD 16.6), for GMFCS III, IV and V children=22.4 (SD13.4). QoL was more related to fine hand functioning($r=0.344$) than to cognition($r=0.295$). There was a strong correlation bond between fine hand functioning and cognition ($r=0.663$). In case fine hand function improved positive changes in cognition were observed in 74% of subjects($p<0.05$). Correlation between grasp power and IQ was weak($r=0.184$). Grasp power improvement was slightly related to QoL($r=0.102$).

Conclusions: Fine hand functioning improves QoL even more that cognition. So training of fine motor skills should be given a priority in case of limited rehabilitation resources.

Disclosure: No significant relationships.

O026

Childhood behaviours and adverse economic and social outcomes – can we improve detection and prevention?

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Introduction: Disruptive behaviours underpin the most prevalent and costly psychiatric disorders in youth including ADHD and conduct disorder. Yet the association between childhood behavioural problems and economic and social outcomes in adulthood are rarely examined in a population-based samples where early detection and prevention may be possible.

Objectives: To examine the association childhood behavioural problems and economic and social outcomes from age 18-35 years across three studies.

Methods: This study draws on 30-year Canadian birth cohort ($n=3017$) linked to government tax return records. Behavioural assessments – for inattention, hyperactivity, opposition, aggression, anxiety and prosociality – were prospectively obtained from teachers when children were aged 6-12 years. Regression models were used to link behavioural assessments in kindergarten (age 5/6 years) to earnings at age 33-35 years (Study 1) and to trajectories of welfare receipt (Study 2), while behaviour at age 10-12 years was linked to trajectories of partnering. Children's IQ and family background were adjusted for.

Results: Inattention, aggression-opposition (males only) and low low-prosociality in kindergarten were associated with lower earnings at age 33-35 years (Study 1), inattention, aggression-opposition and low prosociality in kindergarten predicted following a chronic welfare receipt trajectory from age 18-35 (Study 2), and inattention, aggression-opposition, anxiety and low-prosociality at age 10-12 years were associated with increased likelihood of being unpartnered and with partnership dissolution from age 18-35 years (Study3).

Conclusions: Behavioural assessments made by schoolteachers can identify children at risk of adverse economic and social outcomes in adulthood. The implications of for early screening and prevention will be discussed.

Disclosure: No significant relationships.

Keywords: ADHD; Conduct disorder; Screening; prevention

O027

Association between single nucleotide polymorphisms in oxytocin and vasopressin receptor genes and symptom severity of autism spectrum disorder – preliminary study

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Introduction: One of the defining features of autism spectrum disorder (ASD) are deficits in social interaction and communication. Although their etiology is poorly understood, several lines of evidence from studies on humans and rodents suggest that two