

EPV0049

Uric acid as a predictor of bipolar disorder type 1

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Introduction: It has been shown in the studies that purinergic system dysfunction might have an effect on pathophysiology of bipolar disorder.**Objectives:** In this study, our aims were to compare uric acid levels between patient with bipolar disorder type 1 (BPD1) and healthy controls (HC) and to evaluate the validity of uric acid in predicting bipolar disorder.**Methods:** Consecutive outpatients with a diagnosis of euthymic BPD-1 (n=75) and HC (n=75) were included in the study. The subjects were evaluated with Sociodemographic Data Form, Young Mani Rating Scale (YMRS), Beck Depression Scale. Serum uric acid was measured using an auto analyzer.**Results:** Serum uric acid level in BPD1 group was significantly higher than HC. Significant efficacy of uric acid value was observed in the differentiation of BPD1 and HC [Area under the curve 0.708 (0.626-0.790)]. Significant efficacy of uric acid 5.4 cut off value was observed in the differentiation of BPD1 and HC [Area under the curve 0.667 (0.579-0.8754)]. Sensitivity was 50.7%, positive predictive value (PPV) was 74.5%, specificity was 82.7%, negative predictive value (NPV) was 62.6%.**Conclusions:** Serum uric acid value is effective in detecting bipolar patients.**Disclosure:** No significant relationships.**Keywords:** uric acid; purinergic system dysfunction; bipolar disorder

EPV0050

Personality dimensions and coping strategies in remitted bipolar disorder

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Introduction: The influence of personality on how people deal with stressful situations has long been discussed. In bipolar disorder, these two entities seem to have a role in the outcome of the disease.**Objectives:** To study the relationships between coping strategies in stressful situations and personality dimensions in euthymic bipolar patients.**Methods:** This is a cross-sectional, descriptive and analytical study of 30 patients followed for bipolar disorder in remission, at the psychiatric outpatient clinic at the Hédi Chaker University Hospital in Sfax. We used a socio-demographic and clinical data sheet and the Ten Items Personality Inventory (TIPI) to evaluate

personality dimensions and the Ways Of Coping Checklist (WWC) for the assessment of coping.

Results: The mean age of the patients was 43.77 years, the sex ratio was 0.5. Bipolar I disorder was diagnosed in 93% of patients. WCC: -Coping focused on the problem : 70% of the patients. -Emotion-centered coping : 20% of patients -Coping focused on seeking social support : 10% of patients. TIPI : Conscientiousness was the most represented trait of personality (36.7%), agreeableness (30%) and extraversion (20%). Extraversion was associated with coping focused on the problem: (p=0.015). Agreeableness was associated with coping focused on seeking social support:(p=0.033).**Conclusions:** Our study showed that conscientiousness is the most common trait of personality in bipolar disorder patients. The coping focused on the problem is the most frequent strategy which correlated with extraversion, so, personality dimensions appear as a target for cognitive interventions.**Disclosure:** No significant relationships.**Keywords:** Personality; coping; bipolar; remitted

EPV0051

Emotion regulation in euthymic bipolar patients in Tunisia

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Introduction: Bipolar disorder is presumed to involve difficulties in emotion regulation. However, little is known about the specific emotion regulation profile associated with this disorder.**Objectives:** To study emotion regulation in bipolar patients in remission phase and to determine the factors correlated with it.**Methods:** A cross-sectional, descriptive and analytical study of 30 patients followed for bipolar disorder in remission, at the psychiatric outpatient clinic at the Hédi Chaker University Hospital in Sfax. We used a socio-demographic and clinical data sheet and the Cognitive Emotion Regulation Questionnaire (CERQ) which assesses cognitive strategies (maladaptive and adaptive) for regulating emotion.**Results:** The mean age of the patients was 43.77 years, the sex ratio was 0.5. Bipolar I disorder was diagnosed in 93% of patients. A good adherence to treatment was found in 86.7% of cases and a good social integration in 40%. The mean total score of the adaptive CERQ was 66.73 and the most used adaptive strategy was acceptance (mean score =13.87), while the mean total score of the maladaptive CERQ was 36.7 and the most used maladaptive strategy was self blame (mean score =9.47). Adaptive cognitive emotion regulation was predominant in 93.3% of patients. It was significantly correlated with good adherence to treatment (p = 0.047) and good social integration (p = 0.026).**Conclusions:** Our patients with euthymic bipolar disorder showed a satisfying level of adaptive emotion regulation strategies. A cognitive remediation seems important to embetter this capacity and improve the income of the disease.**Disclosure:** No significant relationships.**Keywords:** remitted; emotion; regulation; bipolar