

BPD patients. We conducted a systematic review based on PRISMA guidelines of published and indexed articles from the following databases; EMBASE, MEDLINE, Google scholar, SCOPUS, Cochrane Library, PsycINFO.

KEY WORD: Lithium, Mood stabilizer, borderline personality disorder. Of the 131 retrieved articles, 9 included our inclusion criteria. **Results:** The review of 9 selected studies showed that lithium is useful in reducing emotional and impulsive behaviors, mood stabilization and suicidal tendencies and was more effective than placebo in preventing recurrence of mood disorders. In the study significant heterogeneity was found between all group of patients which could be due to the difference in the selection of participants and different exposure in the pre-study phase. Quantitative data on participants general health and social functioning were not reported and the direction of effect was the same in all studies.

Conclusions: No studies reported a negative effect for lithium and compared to other mood stabilization, it is more effective in controlling emotional and mood changes and aggression, also its side effects are less if controlled regularly and consistently. However, due to the small number of studies in this field and small sample size in studies, we suggest that more studies be conducted in all age groups.

Disclosure of Interest: None Declared

EPV1373

The Psychopathology of Ink: Tattoos as a Window into Personality (Disorders)

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Introduction: Tattoos, once viewed primarily as symbols of rebellion or cultural affiliation, have become increasingly prevalent and socially accepted across diverse populations. This shift raises questions about the psychological motivations behind body art, particularly in individuals with personality disorders.

Objectives: These case studies explore the potential significance of tattoos in the context of personality psychopathology, examining how tattoos may serve as externalized representations of inner conflicts, identity fragmentation, and unmet emotional needs.

Methods: Through the lens of theory, we will discuss how tattoos can function as a form of self-expression and self-regulation, offering insight into defense mechanisms such as splitting, projection, and sublimation in individuals with borderline, narcissistic, and antisocial personality disorders.

Results: The presentation will also explore the therapeutic implications of tattoos, considering their potential as entry points for understanding the symbolic and emotional worlds of patients with personality disorders. We will also reflect on the clinician's role in addressing tattoos in psychotherapy, balancing sensitivity with inquiry, and understanding how body art may influence the therapeutic alliance.

Conclusions: Through the session we aim to deepen our understanding of tattoos as meaningful psychological markers in modern psychiatric practice.

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EEG Features in Young Patients with Syndromally Different Subtypes of Borderline Personality Disorder

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Introduction: The study of the neurobiological characteristics of borderline personality disorder (BPD) in youth is actual due to its high prevalence, but quantitative EEG studies of BPD have yielded mixed results.

Objectives: The aim of the study was to assess the EEG features in patients with different clinical subtypes of borderline personality disorder (BPD).

Methods: Total of 52 patients aged 16-25 years (mean age 20.4 ± 3.2 years) with BPD (F60.31 by ICD-10) were enrolled in the study. Three groups of patients with different subtypes of BPD (with predominance of “affective storm”, “addictive adrenalin mania” and “cognitive dissociation”) were identified based on clinical and psychopathological characteristics. A pre-treatment multichannel resting EEG was recorded with measurements of EEG spectral power and coherence in narrow frequency sub-bands. Between-group differences in clinical and neurophysiological parameters were identified using Mann-Whitney criteria.

Results: The groups did not differ in EEG spectral power values, but significant ($p < 0.05$) differences between the groups were revealed in the spatial organization of the EEG namely in the number of “highly coherent” functional connections (with coherence coefficients above 0.9) that was the least in the group with “cognitive dissociation”. Low values of the number of such connections in the alpha2 EEG sub-band (9-11 Hz) in the frontal-central-temporal brain regions reflect a relatively poor functional state of the prefrontal cortex in this group.

Conclusions: The noted features of the spatial functional organization of brain activity in patients with different BPD subtypes may underlie differences in their clinical conditions, in control of emotions and behavior.

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The Impact of Intensive Care Unit Patient Care on Hostility Levels Among Relatives

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