were used to measure mental exhaustion and social exclusion, and demographic as well as socioeconomic data were also collected. The analysis employed statistical methods such as Analysis of Variance (ANOVA), Post-Hoc Tests, Regression, and Pearson Correlation Tests to examine the relationships between the variables.

Results: The tests revealed significant results in the various research areas mentioned above.

Conclusions: The study highlights the complex relationships between the examined demographic and socioeconomic factors and the dimensions of mental exhaustion and social exclusion. Significantly important differences were found among older age groups, single participants, individuals with lower educational levels, and various income levels. Further research is needed to explore the causes of these differences in more detail and to develop potential intervention strategies. The findings provide valuable insights for measures aimed at improving workplace well-being.

Disclosure of Interest: None Declared

EPP359

Differential impact of comorbid depression and adjustment disorder on self-compassion in patients with anxiety disorders

K.-U. Lee[1]*, H.-S. Chun[1] and S. Kim[1]

[1]Psychiatry, Uijeongbu St. Mayr's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Korea, Republic Of
*Corresponding author.
doi: 10.1192/j.eurpsy.2025.643

Introduction: The capacity of self-compassion may contribute to the development or protection of psychiatric disorders.

Objectives: This study aimed to examine the relationship between self-compassion and psychopathologies in anxiety disorders and to identify the impact of comorbid depression on self-compassion.

Methods: Patients diagnosed with anxiety disorders were recruited from the outpatient clinic of the Catholic University of Korea. Psychiatric diagnoses were established through interviews based on DSM-5 criteria, conducted by an experienced psychiatrist. Demographic data were collected, and clinical status was evaluated using the Clinical Global Impression (CGI) scale. The severity of anxiety, depression, somatic symptoms, hypochondriasis, and self-compassion were assessed using the Generalized Anxiety Disorder-7 (GAD-7), Patient Health Questionnaire-9 (PHQ-9), Patient Health Questionnaire-15 (PHQ-15), Illness Attitude Scale (IAS), Cyberchondria Severity Scale (CSS-12), and Self-Compassion Scale (SCS), respectively.

Results: The study included 121 participants with a mean age of 48.65 years (SD = 10.10), ranging from 20 to 70 years. The majority of the participants were female, comprising 91 (75.2%) of the sample, while 30 (24.8%) were male. A significant inverse relationship was observed between self-compassion (SCS total) and measures of general psychopathologies and hypochondriasis: PHQ-9

$(r = -0.366, p < 0.001)$, GAD-7 $(r = -0.348, p < 0.001)$, PHQ-15 $(r = -0.349, p < 0.001)$, IAS $(r = -0.293, p < 0.005)$, and CSS-12 $(r = -0.208, p < 0.05)$. Also, strong negative correlations were found with all psychopathology measures, showing that higher negative self-compassion is significantly related to greater psychopathology: PHQ-9 $(r = -0.479, p < 0.001)$, GAD-7 $(r = -0.423, p < 0.001)$, PHQ-15 $(r = -0.364, p < 0.001)$, IAS $(r = -0.374, p < 0.001)$ and CSS-12 $(r = -0.362, p < 0.001)$. An ANCOVA was conducted to assess group differences in self-compassion subscales among patients with anxiety disorders $(N = 71)$, comorbid depressive and adjustment disorders $(N = 22)$, and comorbid somatic symptom and related disorders $(N = 25)$. The results showed a significant difference in the isolation subscale across the groups $(F = 4.636, p = .012)$.

Conclusions: The findings underscore the role of self-compassion in moderating psychopathology severity in anxiety disorders, suggesting that interventions targeting negative self-compassion may help mitigate emotional and physical symptoms in these patients

Disclosure of Interest: None Declared

Bipolar Disorders

EPP363

Theory of Mind Deficits in Individuals at Risk and Early Onset of Bipolar Disorder

E. Cesim[1]*, M. Demir[1], M. Eyuboglu[1], Y. E. Turan[1], Ö. İlhan[1], S. Uzman Özbek[2], B. Yalınçetin[1] and E. Bora[1,2]

[1]Department of Neurosciences and [2]Department of Psychiatry, Dokuz Eylül University, İzmir, Türkiye
*Corresponding author.
doi: 10.1192/j.eurpsy.2025.645

Introduction: Impairments in theory of mind, which influence the ability to accurately perceive and comprehend the mental states of oneself and others, play a pivotal role in psychiatric diseases. Understanding these cognitive aspects is crucial for developing targeted interventions and improving overall patient outcomes.

Objectives: The purpose of this study is to examine theory of mind in individuals at risk for bipolar disorder and in the early stages of the disorder.

Methods: Sixty-two individuals with first-episode bipolar disorder (FE-BD) (mean age 21.92±4.58), seventy-eight individuals at ultra-high risk for bipolar disorder (UHR-BD) (mean age 20.5±3.93), and seventy-four healthy controls (HC) (mean age 23.36±5.28) were included in this study. The Hinting Task (HT) and the Reading the Mind in the Eyes Test (RMET) were applied to assess theory of mind.

Results: The groups differed significantly in RMET positive (F $(2-200)=5.087$, p=0.007), neutral (F$(2-200)=4.777$, p=0.009) subscores, and total score (F$(2-200)=11.267$, p=0.000). Similarly, differences were found among the groups in terms of hypomentalization (F$(2-174)=5.251$, p=0.006), hypermentalization (F$(2-174)=4.786$, p=0.009), and total scores (F$(2-174)=13.292$, p=0.000) on the

Hinting Task. No significant differences were observed in RMET negative scores among the groups (p>0.05). Both the FE-BD and UHR-BD groups exhibited significantly lower scores than the healthy controls across positive, neutral, and total RMET scores, as well as in total Hinting Task scores (p<0.05). Hypomentalization and hypermentalization errors were higher in the FE-BD and UHR-BD groups than in the HC group (p<0.05).

Conclusions: The results revealed significant differences in theory of mind performance between groups, including RMET scores and Hinting Task results. Individuals with first episode bipolar disorder (FE-BD) and those at ultra high risk for bipolar disorder (UHR-BD) consistently scored lower than healthy controls, emphasizing the need for targeted, early interventions in theory of mind and related cognitive processes. Future studies investigating clinical and neurobiological correlates of theory of mind across different stages of bipolar disorder are needed.

Disclosure of Interest: None Declared

EPP364

Thyroid Function Paremeters in Drug Naive, First Episode Mania: Are Thyroid Dysfunctions Present at The Onset of the Illness ? A Case Control Study

F. Çınar[1]*, Ö. Bayırlı[1] and R. Tekdemir[1]

[1]Psychiatry, Selcuk University, Konya, Türkiye
*Corresponding author.
Introduction: Bipolar disorder features recurrent episodes of mania, hypomania, and depression, with first-episode mania serving as an early indicator. The biological and psychological factors involved are not fully understood. Thyroid hormones play a vital role in brain metabolism, and their dysregulation has been linked to mood disorders, indicating potential abnormalities during manic episodes.

Objectives: This study aims to evaluate the presence of thyroid dysfunction in drug-naive patients experiencing their first episode of mania compared to a healty control group.

Methods: This study included forty-eight drug-naive patients diagnosed with first-episode mania, who were hospitalized for treatment, and a control group of forty-eight healthy individuals. The healthy control group was matched for age and sex and had no history of psychiatric illness or treatment. There were no physical illnesses in either group. Symptom severity was assessed using the Brief Psychiatric Rating Scale (BPRS) and the Young Mania Rating Scale (YMRS). Serum T3, T4, TSH levels were measured in both groups. The study protocol was approved by the Local Ethics Committee of Selcuk Üniversity.

Results: There were no differences in sex and age distribution between the groups. In the patient group, 54.2% (n=26) were female, with a mean age of 24.98 (±7.38). Additionally, 16.7% (n=8) had a history of depression, and 49.7% (n=23) exhibited psychotic features. Analysis of serum TSH, T3, T4, and the T3/T4 ratio showed no significant differences between groups (TSH: t=-0.466, p=0.642; T3: t=1.258, p=0.212; T4: t=-0.874, p=0.382; T3/T4: t=-1.291, p=0.200). T3 levels were higher in males overall and in the control group (t=-3.000, p=0.004; t=-3.753, p<0.001), but not in the patient group (p>0.05). Among patients, T4 levels were significantly higher in those with psychotic features (t=-2.410,

p=0.020). Correlation analysis showed no significant relationships between thyroid function tests and clinical variables.

Conclusions: This study found no significant differences in thyroid function parameters between drug-naive patients with first-episode mania and healthy controls, suggesting that thyroid dysfunction may not be present at the onset of mania. While T4 levels were higher in patients with psychotic features, overall results indicate that thyroid abnormalities do not play a critical role in the immediate presentation of this disorder. These findings highlight the need for further research to explore the long-term relationship between thyroid function and bipolar disorder.

Disclosure of Interest: None Declared

EPP366

Assessing language abnormalities using NLP methods in speech excerpts of individuals at ultra-high risk for bipolar disorder

E. Kizilay[1]*, B. Arslan[1] and E. Bora[1,2,3]

[1]Department of Neurosciences; [2]Department of Psychiatry, Dokuz Eylul University, Izmir, Türkiye and [3]Department of Psychiatry, University of Melbourne and Melbourne Health, Melbourne , Australia
*Corresponding author.

Introduction: Detection for individuals at ultra-high risk for bipolar disorder (UHR-BD) is crucial due to the exploration of potential biomarkers at the early stages of bipolar disorder, including language abnormalities. Formal thought disorder (FTD) is an important symptom that can be observed in BD, which may be mildly noticeable during the early stages of the disease. Automated methods have demonstrated the ability to evaluate FTD in psychotic disorders and can also be employed to evaluate FTD in the speech of individuals at UHR-BD.

Objectives: This study aimed to investigate the differences in language between UHR-BD and healthy controls (HC) using natural language processing (NLP) methods.

Methods: We collected speech samples from 20 individuals at UHR-BD and 20 HC during descriptions of eight Thematic Apperception Test (TAT) pictures, which were then manually transcribed. After transcribing the text, word2vec was used to convert it into vectors. The semantic similarity between words was calculated using a moving window approach to windows of words sized 5-10. Finally, the mean and variance of similarities were determined.

Results: The variances of similarities in the windows of 5 to 9 were increased in UHR-BD (p=0.004, p=0.005, p=0.01, p=0.02, and p=0.037, respectively). There was no significant difference regarding the mean similarity.

Conclusions: To our knowledge, this is the first study to evaluate language with NLP methods in individuals at UHR-BD. Our findings showed that the variance of semantic similarity differed between the two groups. This indicates NLP methods may be used in the UHR-BD group to detect FTD.

Disclosure of Interest: None Declared