Conclusions These preliminary findings suggest that platelet fatty acids may be possible biological markers to improve the diagnosis of BD.
Disclosure of interest The authors have not supplied their declaration of competing interest.

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EW0308

Bipolar disorder in epilepsy

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Introduction Bipolar disorder (BD) and epilepsy are the chronic recurrent diseases with several similarities in pathogenic mechanisms. There are high prevalence of comorbidity between affective disorders and epilepsy. However, most recent studies focused on association epilepsy with depression, while lack of scientific data about relationship between epilepsy and BD.
Objectives This study examined the frequency of bipolar disorder in epileptic patients.
Aims To improve the diagnostic tool for BD in epileptic patients.
Materials and methods We observed 50 patients with epilepsy (PE). In this study, the symptoms of BD were measured by the Hypomania Checklist-32 (HCL-32).
Results The mean age of the entire cohort was 40 (SD = 19.2) years. The proportion of females were 62%. The mean score using HCL-32 were 11.1 (SD = 4.5, range: 3–20) with 17 (34%) scoring above 14, the cut-off points for the basic version of the HCL-32. Among of high score subgroup there were 6 men and 11 women, maximum age was 74 and minimum 19, the mean age of the subgroup were 37 years. The patients 8 out of 17 (47%) received a score of 20 or more (maximum of 37) on the bipolar index that corresponds to ≥ 20% probability BD.
Conclusion The results of the study observed a high prevalence of BD in PE. Future research addressing (1) using of psychiatric examination instruments to assess affective symptoms among PE and (2) treatment management of affective symptoms by antiepileptic drugs might result in better treatment outcomes among patient with comorbidities of BD and PE.
Disclosure of interest The authors have not supplied their declaration of competing interest.

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EW0309

Early and late onset bipolar disorders in older adults

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Introduction Age of onset of illness may be useful in explaining the heterogeneity among older bipolar patients.
Objective To examine the relationship of age of onset with clinical, demographic and behavioral variables, in older patients with bipolar disorder.
Methods This was a cross-sectional, descriptive and analytical study, including 24 patients suffering from bipolar disorders, aged 65 years or more and followed-up in outpatient psychiatry unit at Hedi Chaker university hospital in Sfax in Tunisia. We used a standardized questionnaire including socio-demographic, behavioral and clinical data. Age of onset was split at age 40 years into early-onset (< 40 years; $n = 12$) and late-onset (≥ 40 years; $n = 12$) groups.
Results The mean age for the entire sample was 68.95 years. The mean age of onset was 39.95 years. The majority (60%) of patients were diagnosed with bipolar I. Few meaningful differences emerged between early-onset and late-onset groups, except that tobacco use was significantly higher in the late-onset group (66.6% vs. 16.6%; $P = 0.027$). No significant differences between the early-onset and late-onset groups were seen on demographic variables, family history and number of medical diagnoses or presence of psychotic features.
Conclusion Our study found few meaningful behavioral differences between early versus late age at onset in older adults with bipolar disorder.
Disclosure of interest The authors have not supplied their declaration of competing interest.

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EW0310

Cultural variations in bipolar disorders in non-clinical samples

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Introduction The prevalence of bipolar disorder (BD) is continuously increasing worldwide. Based on pathophysiological prospective, BD is related to the change in neural circuitry involved in the regulation of emotion. Since there is a cultural variation in emotion expression, it is expected that BD is subject to cultural differences. The literature suggests that the prevalence of BD is influenced by gender, region and ethnicity.
Objectives Exploring the pervasiveness of BD in the Arab cultures.
Aims – exploring the pervasiveness of BD in six different but related Arab cultures;
– examining the gender differences in BD in the Arab cultural context.
Methods This study used 327 freshmen university students (42% males and 58% females) from six different Arab universities and administered the Mood Disorder Questionnaire (MDQ). The validity and reliability of the MDQ was measured on 220 Qatari university students.
Results The results showed that BD was positively related to age and that males exhibited greater BD symptoms than females. The MDQ scores varied between the Arab subcultures. Sudanese subjects scored the highest on the MDQ, and therefore showed the highest numbers of BD characteristics, followed by Palestinians, Egyptians, Yemenis, Qataris, Jordanians and Tunisians. The Tunisians exhibited the lowest BD symptoms among six Arab cultures.
Conclusions The findings suggested that it is arguable that BD is sensitive to cultural variations in the Arab world, with males showing a higher number of bipolar symptoms. It is arguable that BD is influenced by cultural openness and socioeconomic status.
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