

hospitalizations and his condition has improved with olanzapine 20 mg/ daily and L.A.I. of paliperidone (once /monthly).

**Conclusions:** By far, DBS, as a treatment modality, has great potential to modify disease outcomes and potentially cure the devastating genetic neurodegenerative disorder such as chorea. The cases with psychiatric side effects of DBS have been described so rarely, that it's difficult to formulate conclusions that can be applied to the whole population of patients treated with DBS. In our opinion, in some cases it is possible to effectively treat the psychotic symptoms without resignation from the benefits of DBS.

**Disclosure of Interest:** None Declared

## EPP0271

### Psychotic experiences in university students: prevalence, correlates and association with non-specific psychological distress

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**Introduction:** Subclinical psychotic experiences (PEs) are far more prevalent than psychotic disorders, with an estimated prevalence of 7.2% (Linscott & Van Os. Psychol Med 2013;43 (6) 1133-1149). PEs are particularly prevalent in late adolescence and young adulthood, when obtaining academic education is one of the main developmental tasks. University students are at the peak age of onset of mental disorders, and often experience high levels of social and academic stress that may contribute to the onset of psychopathology. Hence, estimating the prevalence and correlates of PEs among university students is particularly important.

**Objectives:** To estimate the prevalence of PEs in a sample of Israeli students; assess whether rates of PEs differ by selected sociodemographic characteristics; and examine the association between PEs and non-specific psychological distress.

**Methods:** 150 students from universities and colleges in Israel participated in a cross-sectional online survey. All students were over the age of 18 and were not diagnosed with psychotic disorders. Participants completed self-report questionnaires, including the Prodromal Questionnaire - Brief Version (PQ-B), Kessler Psychological Distress Scale (K10) and sociodemographic details. The PQ-B yields a score for the total number of items endorsed (range 0–21), and a total distress score (range 0–105). A cutoff of  $\geq 8$  distressing symptoms was used to identify participants at high-risk for psychosis.

**Results:** 21 participants (14.0%) reported 8 or more distressing PEs. PEs were more common in males and among those with a psychiatric illness (Table 1). PEs were not associated with marital status, religiosity, or immigrant status. While a greater number of PEs was positively associated with non-specific psychological distress ( $r=0.589$ ,  $p<.001$ ), there was no association between distress caused by PEs and non-specific psychological distress ( $r=0.145$ , NS).

**Table 1.** Sociodemographic characteristics by group

		PEs-	PEs+	$\chi^2$ , p
Sex	M	29.5%	52.4%	4.32, .038
	F	70.5%	47.6%	
Marital Status	Married	17.1%	23.8%	0.56, NS
	Unmarried	82.9%	76.2%	
Immigrant	No	89.9%	85.7%	0.34, NS
	Yes	10.1%	14.3%	
Religiosity	Secular	74.4%	57.1%	2.67, NS
	Other	25.6%	42.9%	
Psychiatric illness	No	87.6%	61.9%	8.87, .003
	Yes	12.4%	38.1%	

**Conclusions:** The findings confirm that self-reported PEs are much more prevalent than clinically diagnosed psychotic disorders, particularly among young adults. As PEs were found to be associated with non-specific psychological distress, and as they are known forerunners for severe mental disorders, it is important to address mental health issues in school settings and promote prevention and early intervention programs.

**Disclosure of Interest:** None Declared

## EPP0272

### Retrospective Assessment of Metabolic Syndrome and Cardiovascular Disease Risk Following Monthly and Three-Month Long-Acting Paliperidone Palmitate Treatment in Schizophrenia

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**Introduction:** Patients with schizophrenia exhibit a higher prevalence of metabolic syndrome and cardiovascular diseases compared to the general population, resulting in increased mortality rates. The extent of this risk may vary based on the specific treatment employed.

**Objectives:** This study aims to compare the risk assessments of metabolic syndrome and cardiovascular diseases in schizophrenia patients who transitioned from monthly long-acting paliperidone palmitate (PP1M) treatment to three-month long-acting paliperidone palmitate (PP3M) treatment during both treatment periods.

**Methods:** The research was conducted at the Psychiatry Clinic and Psychotic Disorders Outpatient Clinic of Selcuk University Faculty of Medicine. Eligible participants included patients under PP3M treatment for a minimum of 6 months and undergoing continuous monitoring in the psychotic disorders outpatient clinic. Sociodemographic and clinical data, scales, laboratory values, and measurements taken both before and during the use of PP3M and PP1M were retrieved from file records, encompassing assessments,