

EPV1048

Premorbid of depressive youth at clinical high-risk for psychosis

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Introduction: Early detection of psychosis is a promising area in preventive psychiatry. The use of early intervention can prevent the first episode psychosis and improve outcomes.

Objectives: Identification of premorbid features of depressive patients at clinical high risk for psychosis (CHR) comparing with depressive patients without CHR in order to improve early recognition of the psychotic process.

Methods: 219 young depressive in-patients with CHR criteria for SOPS with attenuated positive and attenuated negative symptoms and 52 young depressive in-patients without CHR were examined. Presence of obstetric complications, neurodevelopmental deviance, neurological and psychiatric signs at the premorbid stage, and the level of premorbid functioning on the PAS were examined.

Results: It has been established that depressive patients at CHR and without CHR had some obstetric complications (57.5% and 40.4%, respectively). Neurodevelopmental deviance in the first year of live was in 57.5% patients with CHR. At the age of 3-5 sleep disorders, ADHD and phobias were more common in patients at CHR than without it (58.8% and 32.7%, $p=0.014$). In pubertal, patients at CHR were more likely to show depression symptoms, obsessions, and aggression - 90.4% versus 76.9% ($p=0.029$). On the PAS scale, a decrease of the level of premorbid functioning has been observed in two groups of patients with and without CHR from the age of 12: from 12 to 15 years, 0.4 and 0.3 ($p=0.004$), from 16 to 18 years, 0.47 and 0.37 ($p=0.001$).

Conclusions: Premorbid functioning were worst in patients with CHR, which indicates the possibility of early clinical detection of psychosis.

Disclosure: No significant relationships.

Keywords: Youth depression; prevention; Clinical high-risk; premorbid

EPV1047

Premorbid screening of healthy students may carry latent liability for schizophrenia or bipolar affective disorder with neurocognitive and neurophenomenological methods

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Introduction: This study was carried out to map psychosis spectrum disorder risk factors.

Objectives: Our goal was to find what kind of instrumental methods may help to detect latent liabilities for schizophrenia and bipolar affective disorder

Methods: Using online questionnaires $n=710$ students were screened. Groups were formed based on the inclusion criteria: $N = 25$ people prone to mood swings, $N = 30$ people prone to odd experiences and delusive thinking, and a normal control group with $N = 30$ people. Personality, temperament, self-experiences, affectivity scales, and cognitive screening were conducted in addition to actigraphy coupled with a mobile application for detecting subjective experiences (EMA). Furthermore, instrumental examination of self-agency, testing time interval discrimination and (re)production, eye-tracking, EEG-microstates, and laboratory testing of inflammatory, immunologic and cardio-metabolic measures of allostatic load were applied.

Results: Self-experience disorders: both risk groups showed significantly higher scores than the control group (CG). Self-agency: based on incorrectly attributed responses, the positive schizotypy risk factor (PSF) group differed from the CG ($p = 0.003$). Antisaccade study: the PSF group showed a difference from the CG ($p = 0.002$). Actigraphy: based on the distributions of diurnal cumulative activities, it distinguished those with a cyclothymic risk factor (CTF) from the CG (67% probability in the k-means clustering procedure).

Conclusions: Healthy students with a latent liability for schizotypy or bipolarity could be distinguished by some targeted laboratory methods. Susceptibility for bipolarity was indicated by actigraphic analyzes, and the risk for schizotypal development was indicated by deficiencies in the self-agency experience and by anti-saccadic eye movement disorders.

Disclosure: No significant relationships.

Keywords: self-agency; self-disorder; antisaccadic; actigraphy

EPV1048

Sustainability for humans and the humane from a pediatric point of view

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Introduction: We need to live in harmony with our lifestyle rhythms to stay healthy. A problem in our time is that technical devices have no respect for rhythm. If we get caught up in the technique and start neglecting our natural body needs such as sleep, eat and exercise – it will affect our health negatively. Today, children have increasing problems with mental health. When analyzing the problem we find rhythmical problems, often associated to technology. Being a parent in our time is hard. Time has come for us to take active care of our natural rhythms, to stay healthy.

Objectives: Increasing mental health problems among the young is a global issue in the industrialized world. We see a connection between digitization, the intro of smartphones 2007 and the increase of anxiety, depression and melt downs in children who are left with to little adult guidance. Their screen time becomes to long leading to impaired health due to long sedentary time. The result is not enough physical activity, obesity, introversy because of lack of IRL social contact etc. The problems are well known but why don't we talk more about them and help our children to deal with it?

Methods: Read any statistics about mental helath among the young in the industrialized countries.

Results: While studying the statistics in Sweden over time the results of the bad sustainability of living are clear.

Conclusions: The adult world needs a wake up call which I will give in my oral presentation. I will also present proposals of solution.

Disclosure: No significant relationships.

Keywords: sustainability; mental health; prevention; Adolescents

EPV1049

E-tool for mental health prevention: a study of the receptivity and engagement in a large-scale group of subjects

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Introduction: Due to the Covid-19 effects, mental health conditions are now, more than ever, affecting our daily lives - both personally and professionally. The average delay between the onset of first symptoms of a mental health disorder and seeking suitable healthcare is 11 years. The WHO states that the only sustainable way to reduce mental healthcare burden is by acting earlier.

Objectives: The aim of this project is to assess the receptivity and engagement of a mobile app for mental health prevention, amongst a large-scale and heterogeneous group of individuals. The main hypothesis under testing is that people are receptive to actively act towards mental health prevention, despite still being a very neglected and stigmatized topic.

Methods: A mobile app for mental health improvement and disease prevention was developed through the digitalization of positive psychology strategies, such as mood tracking, journaling, breathing exercises, among others, which are personalized to the user through biofeedback. The app aims at teaching people how to autonomously cope with mental health conditions, identifying early signs and redirecting them to proper mental health professionals. The app is being released for a population of 35,000 subjects resident in Portugal.

Results: Receptivity and engagement metrics will be assessed on a weekly and monthly basis, for 3 months, segmented by different subject profiles. Mental health metrics will also be assessed, namely anxiety, depression, and burnout levels - using standard psychiatric scales.

Conclusions: We have yet to draw conclusions from the project; however, we aim to achieve first results in due time.

Disclosure: The aim of this research is to assess the receptivity of mental health prevention strategies using technology, namely a mobile app provided by a company.

Keywords: GAD; Biofeedback; burnout; prevention

EPV1050

Economic evidence of preventive interventions for anxiety disorders in children and adolescents – a systematic review

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Introduction: Anxiety disorders are common in children and youth. Also, in prevention, be it universal, selective or indicated, economic evaluation supports decision-making in the allocation of scarce resources.

Objectives: This review identified and summarised the existing evidence of economic evaluations for the prevention of anxiety disorders in children and adolescents.

Methods: A systematic search was conducted on the EBSCO, Scopus, Web of Science, ProQuest, Cochrane and PubMed databases. We included studies that focused on children and adolescents under 18 years of age, aimed to prevent anxiety disorders, and presented an incremental analysis of costs and effectiveness. A registered checklist was used that assessed the quality of the included articles.

Results: The search yielded 1,697 articles. Five articles were included in this review. Three were RCT-based and two were model-based studies. Out of five included interventions, one was a universal school-based intervention, two selective interventions and two indicated interventions. Universal school-based prevention of anxiety was not cost-effective compared to usual teaching. Selective parent training and indicative child- and parent-focused CBT prevention were likely cost-effective compared to usual care or doing nothing.

Conclusions: Parent education and cognitive behaviour therapy interventions can be cautiously interpreted as being a cost-effective way of preventing anxiety in children and adolescents. However, the evidence is weak related to cost-effectiveness as there are only a few studies, with relatively small sample sizes and short follow-ups.

Disclosure: No significant relationships.

Keywords: prevention; Anxiety; economic evaluation; children and adolescents

EPV1051

The Worldview Attitudes and Self-Determination in Russian Students who are Different Passion Degree of Tolkien Fans

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