

Abstract: Microdosing psychedelics has garnered considerable attention within both nonprofessional circles and the scientific community in recent years. This method involves taking small, non-hallucinogenic doses of substances like LSD or psilocybin over weeks or months, purportedly to enhance specific behaviors, emotions, or address psychiatric conditions.

Exploring these assertions is crucial given the potential therapeutic value of microdosing, especially in conditions that respond positively to full psychedelic doses, such as depression. The full psychedelic experience might not always be suitable due to various factors like age, capacity to consent or comprehend the experience (e.g., dementia), or individual personality traits that might hinder surrendering to the experience. Microdosing could potentially serve as a maintenance therapy post-full dose administration, aiding specific psychological or biological processes during therapy or therapeutic exercises.

Recent studies in healthy individuals highlight that small psychedelic doses have nuanced effects on pain perception, mood, neuroplasticity, sleep duration, brain connectivity, and default mode network synchronicity. However, some parameters show null effects after both single and repeated administration.

Our survey research uncovered that individuals with ADHD reported symptom relief through microdosing, deeming it more effective than their conventional treatments. Subsequently, we conducted a naturalistic study following individuals with ADHD across a 4-week microdosing period. Our findings indicated a reduction in symptoms over time, an increase in trait mindfulness, and a decrease in neuroticism compared to baseline. While these results are intriguing, they necessitate validation in a clinical trial. We have recently concluded such a trial and are currently analyzing the data to further explore these effects.

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CRS0004

Easy access to youth mental health services in the Netherlands

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Abstract: Mental health problems have increased following the pandemic and are associated with considerable health, economic and societal outcomes, particularly affecting youth. In co-creation with young people several European prevention and early intervention strategies to promote mental wellbeing of youth are currently being developed. The development and implementation of easy-access youth mental services across Europe will be presented and discussed. In addition pilot data of online, hybrid treatment platforms and self-management ecological momentary intervention apps will be presented. Ultimately the aim is: 1) to develop clinical guidelines, best practices, and policy recommendations to

mitigate the youth mental health challenges and 2) improve (cost-) effectiveness of early intervention strategies for promotion and prevention in mental health, including enhancing mental health literacy, resilience and self-management, while 3) actively involving young people in the process of these innovative developments. To amplify the reach, campaigns designed in co-creation with young people, to increase awareness, literacy, wellbeing and help-seeking among young people, targeting schools, further-education colleges, universities and other specific settings will need to be developed, specifically paying attention to high-risk groups within this young population, including children of parents with mental disorders, migrants, young people growing up in poverty, those in/leaving care, and the LGBTQ+ community, with coordination across domains: schools, general practitioners, and specialized mental healthcare facilities.

Disclosure of Interest: None Declared

CRS0005

Changes in brain structure and function in youth at familial risk for schizophrenia or bipolar disorder: implications for early intervention

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Abstract: The evaluation of child and adolescent offspring of patients with schizophrenia or bipolar disorder seeks to understand changes taking place in the brain in individuals at heightened risk for disease during a key developmental period. In this session I will present findings from the BASYS (Bipolar And Schizophrenia Young offspring Study) cohort, which has recruited young offspring of patients with schizophrenia or bipolar disorder ages 6 to 17 years, using clinical, cognitive and brain imaging measures for over 15 years in Spain. I will begin by reviewing our baseline and 2 year findings using structural magnetic resonance imaging (MRI) measures, where we found whole brain and regional cortical grey matter volume and surface area reductions, specifically in offspring of patients with schizophrenia relative to controls, but not in offspring of patients with bipolar disorder, which I will compare with results from the ENIGMA relatives working group analyses. Within our cohort I will explain the relevance of baseline brain structural findings to clinical and cognitive outcome over time. I will then present longitudinal analyses of structural and functional MRI measures at up to 8 year follow-up, examining the influence of development of psychotic spectrum symptoms over time and cognitive and functional outcomes, on longitudinal brain imaging measures. I will finish the talk explaining avenues for future research in the field, which include incorporating other imaging modalities and validating our findings in other cohorts, while I will also present avenues for increasing understanding of the neurobiological changes underpinning our MRI findings.

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CRS0006

Brain developmental trajectories in offspring of parents with schizophrenia or bipolar disorder

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Abstract: Early diagnosis and intervention are essential for managing and improving long-term outcomes of severe mental illness, highlighting the need for reliable early biomarkers. This longitudinal study explores whether the development of the brain during childhood and adolescence differs between offspring of parents with and without schizophrenia or bipolar disorder. Moreover, we will assess if the age-dependent change over time in brain volume, cortical thickness and surface, structural network indices, and cortical gyrification are related to the presence and severity of psychiatric symptoms and level of IQ.

We obtained 286 T1-weighted MRI scans of 184 offspring (aged 8–18 years at baseline) of at least one parent diagnosed with bipolar disorder (n=78) or schizophrenia (n=52) and offspring of parents without severe mental illness (n=54); 102 offspring underwent a follow-up scan (on average 3.9 years between scans).

Group comparisons and the associations with clinical and cognitive measures were analysed with linear mixed-effects models. To correct for multiple comparisons, we applied a Benjamini-Hochberg false discovery rate (FDR) correction ($q=0.05$).

A significant effect of age was found on most of the included brain features, with suggestive evidence for subtle deviations in trajectories in the cortical thickness, structural network indices but not in gyrification index, sulcal depth, length and width or surface area in offspring of parents with schizophrenia. Interestingly, these deviations in brain development in schizophrenia offspring remained significant after taking the presence of a diagnosis or level of IQ into account. These findings suggest the aberrant brain development in familial high-risk youngsters is associated with being at familial risk and not with (also) being at clinical high-risk.

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Symposium

SP0001

Catalyst effect of human body odours in social anxiety treatment – a pilot study.

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Abstract: POTION is an EU funded project (No. 824153) within the Horizon2020 initiative that aims at understanding the nature of chemosignals in humans and their sphere of influence on social interaction. The emotional state of one person can be transmitted to another through volatile molecules contained, for example, in the sweat. These molecules, or chemosignals, are processed by the receiver who is not only able to identify the feelings of the sender but also to respond accordingly.

Within this project, we conducted a study with the aim of exploring the possible catalyst effects of body odour on social anxiety. We hypothesized that subjects exposed to human chemosignals, while undergoing mindfulness treatment, would show an enhanced reduction in anxiety symptoms in comparison to the control group (exposed to clean air).

To this aim, a study including 96 women aged between 18 and 35 years with symptoms of social anxiety was conducted. After recruitment, subjects were randomly allocated to one exposure group (happiness, fear or neutral human body odour or clean air) and followed a mindfulness intervention while being exposed to one of the odour or clean air. The same intervention was repeated twice, over two consecutive days. The main outcome was change in the State-Trait Anxiety Inventory (STAI) scores for which data was collected before and after treatment at each day. Mixed model analysis revealed significant changes in STAI scores in all groups during both days of trial. However, a greater decrease in anxiety symptoms was observed in subjects exposed to fear chemosignals during both days. A post-hoc comparison of the group exposed to clean air and the group exposed to fear chemosignals showed a trend level time x odour interaction during the second day of trial ($F(1,45)=3.74, p=0.07$).

In conclusion, our pilot study indicated a potential use of human body odours as a catalysts of social anxiety treatment. While the small sample size restricts the generalizability of our findings, the observed trends offer a promising foundation for future research.

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