and task-related power spectra, functional connectivity, micro-states and epileptic abnormalities. At pre-treatment EEG, the most relevant predictors of a poor response were a change in theta power compared to healthy control, a high alpha power and connectivity, a diminished beta power in resting-state. Considering EEG during treatment, an increased theta power, a reduced beta-band activity, an increased alpha activity, a decreased coherence in theta, alpha and beta-band were related to a favorable outcome.

Conclusions: EEG is promising as a method to create a predictive biomarker for response to APs; further investigations are warranted to harmonize and generalize the contradictory results of reviewed studies.

Disclosure of Interest: None Declared

O0089

Multidimensional assessment of personality disorders using different theoretical models: a comparison of the Young Schema Questionnaire, the SCID-5-AMPD structured diagnostic interview, and the PDS-ICD-11 self-report questionnaire

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doi: 10.1192/j.eurpsy.2024.1392

Introduction: There has been a recent shift in the conceptualisation of personality disorders in diagnostic systems such as DSM-5 or ICD-11, from a categorical approach towards a dimensional approach reflecting severity in general or severity of dysfunction and related pathological traits. In addition, several psychothera-peutic approaches work with their own model of personality pathology, which similarly capture symptoms of personality disorders and their underlying processes in a more subtle way from multiple aspects, and along different constructs.

Objectives: The aim of our study was to investigate similarities and differences between conceptualisations of personality disorder and instruments used for evaluation based on the BNO-11 Personality Disorders Severity Questionnaire (PDS-ICD-11), Module I. of the Structured Diagnostic Interview for the DSM-5 Alternative Personality Model (SCID-5-AMPD) measuring level of personality function, and the Young Schema Questionnaire assessing early maladaptive schemas.

Methods: Hospitalized borderline patients were assessed using the Young Schema Questionnaire, the PDS-ICD-11, and Module I. of the SCID-5-AMPD assessing personality function level. Data are analysed using correlation and linear regression models.

Results: Only part of the results are shown. The PDS-ICD-11 Severity Index and Self-function Index showed significant (p<0.05) and strong correlations with the Abandonment (r=0.98, r=0.94), Vulnerability to harm and illness (r=0. 92, r=0.98),

Insufficient Self-Control (r=0.91, r=0.88) and Negativism/Pessim-ism (r=0.95, r=0.90) schemas. The mean score and all domains of the SCID-5-AMPD Module I (level of personality function) showed significant strong correlations with the Vulnerability to harm and illness schema (AMPD-Average r=0.87; AMPD-Identity r=0.86, AMPD-Objectivity r=0.81, AMPD-Empathy r=0. 77, AMPD-Intimacy r=0.80, p<0.05); moreover, a strong significant correlation was found between the Abandonment schema and AMPD-Average (r=0.81, p<0.05), AMPD-Identity (r=0.98, p<0.05), and AMPD-Intimacy domains (r=0.77, p<0.05).

Conclusions: The main indicators of measures that operationalise a dimensional approach to personality disorders show distinct patterns of strong overlap with some of the maladaptive schemas but cover only a part of the schema domains. For a careful diagnosis and psychotherapeutic plan, the combined use of these measures can provide in-depth and multifaceted information.

Disclosure of Interest: None Declared

Prevention of Mental Disorders

EPV0759

The Role of Alcohol Use Disorders in the Development and Progression of Dementia

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doi: 10.1192/j.eurpsy.2024.1393

Introduction: In recent years, there has been an increase in interest and research into the link between alcohol use disorders (AUD) and dementia. Alcohol use disorders, which are characterised by excessive and problematic alcohol consumption, have been associated to a variety of detrimental health effects, including liver disease, cardiovascular difficulties, and cognitive impairments.

Objectives: To explore the link between alcohol use disorders and dementia onset and progression, explaining probable causes and emphasising preventive approaches.

Methods: The present study involved a thorough examination of relevant research papers, with a specific emphasis on longitudinal cohort studies, neuropathological observations, and biochemical interactions pertaining to the effects of alcohol on the brain. In addition to the aforementioned criteria, the review also took into account other complicating factors, including choices regarding lifestyle, genetic predisposition, and coexisting medical conditions.

Results: The results indicate a strong association between prolonged and excessive alcohol consumption and a heightened susceptibility to the early onset of dementia. The mechanisms underlying alcohol-related neurological damage encompass direct neurotoxic effects of

alcohol, thiamine shortage, and alcohol-related cerebrovascular illness. Moreover, it is worth noting that alcohol use disorder (AUD) has the potential to worsen the advancement of neurodegenerative processes in individuals already diagnosed with dementia.

Conclusions: The association between AUD (Alcohol Use Disorder) and dementia is complex and involves multiple factors, presenting considerable difficulties in terms of clinical intervention and treatment. The use of early intervention strategies and public health initiatives focused on addressing alcohol use disorder (AUD) could have a significant impact on preventing or reducing the development of dementia.

Disclosure of Interest: None Declared

EPV0761

Under-attribution in self-agency on pre-reflexive task connected to positive schizotypal traits among healthy students

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doi: 10.1192/j.eurpsy.2024.1394

Introduction: The aim of this study was to identify low-risk traits of schizophrenia among healthy undergraduate student volunteers, and the investigation of these traits with regards to their specificity in contrast to individuals with a latent disposition towards bipolar disorder. Self-agency, as a phenomenon closely related to psychomotor functioning, provides a unique opportunity for the investigation of subjective self-perception.

Objectives: The implicit self-agency performances that are considered illness- (or risk state-) specific were compared between groups to find early markers of a specific schizotypic developmental path.

Methods: In a sample of 710 healthy university students, with the help of screening questionnaires, we were able to successfully form two risk groups, in one of them the emphasis on cyclothymia (CTF: Cyclothymia factor group, N=25), and in the other (PSF: Positive schizotypy factor group, N=26) the tendency to unusual experiences and paranoid thinking emphasis was typical. We assigned a properly matched control group (N=29) displaying both features on average. We focused on the implicit aspect of self-agency, using the well-known paradigm of intentional binding, as well as the self-developed device that exclusively tests the pre-reflexive feeling of movement initiation, the sense of self-agency.

Results: During the examination of intentional binding, although the specific predictive and retrospective component indicators did not show any significant difference for either group, the association of the sound alone could induce a binding effect in the control group. In the predictable frequency condition, there was a strong significant effect ($W = 65.00$, $p = .007$, rrb = -.60), and in the non-predictable condition a trend-level effect. Remarkably, this binding effect did not develop in either the CTF or PSF groups, indicating an implicit agency impairment in both risk groups. However, during the examination of sense of self-agency, we observed a disturbance specifically among healthy college students with positive schizotypal traits, in the form of falsely attributing their movement initiation to external influences. The percentage of this 'miss'-type answering differed between groups, $H(2) = 7.68$, $p = .021$, $\epsilon 2 = .10$. The Dwass-SteelCritchlow-Fligner pairwise comparisons showed that this difference was due to the PSF Group showing a significant difference from the Control Group ($W = -3.83$, $p = .019$), but not from the CTF group, and the CTF Group also did not differ from the Control Group.

Conclusions: Thus, in premorbid conditions, in at-risk groups of non-help-seeking individuals, or in cases of early detection of prodromal abnormalities, objective confirmation of suspected susceptibility to schizophrenia may be aided by, among other things, instrumental assessment of self-agency.

Disclosure of Interest: None Declared

EPV0762

Chronotype and health related quality of life among undergraduate university students

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doi: 10.1192/j.eurpsy.2024.1395

Introduction: Chronotype represents genetically determined behavioral characteristics of a person's twenty-four-hour activity. Research shows that a person's chronotype is interrelated with their mental health. Are there similar connections with general health and health related quality of life?

Objectives: To establish how various chronotypes are represented in university students and if there are any interrelations between chronotypes and health-related quality of life

Methods: We used SF-12 Health Survey и Morningness–Eveningness Questionnaire (MEQ) by Horne and Ostberg to survey 305 university students of both genders.

Results: The results showed that the majority of the students (71.2%) have an intermediate chronotype. The second goes a moderate morning chronotype (17.7%), the third – a moderate evening chronotype (9.8%). Definite morning and definite evening chronotypes were revealed in less than 1% of the students. SF-12 Health Survey scale indicators that assess quality of life corresponded to standard scores for the given group of the respondents. We have revealed valid relations in correlational interconnections of the achieved parameters. Thus, the morning chronotype is most consistently associated ($p<0.01$) in undergraduate university students with higher indicators of health related quality of life including General Health (r=.23), Vitality (r=.21), Role Physical (r=.18), Role Emotional (r=.17), Physical Functioning (r=.16), Social Functioning (r=.13). Mental Health and Bodily Pain in university students are not connected with the chronotype ($p>05$).

Conclusions: Therefore, this research establishes that the majority of the students are related to the intermediate chronotype, and the