

by examining plasma levels and gene expression levels of cytokines and complement proteins as well as by profiling promoter DNA methylation pattern of genes coding for cytokines and complement proteins.

Methods: Fifty-seven schizophrenia patients fulfilling DSM-V criteria were recruited into the study and randomized into Yoga therapy (n=28) and waitlist control (n=29) groups. Plasma levels of IL-1 β , IL-6, IL-10, IL-17, C1q, C2, C3, C4, C5, C5a, Factor B and Factor H by Multiplex Suspension Assay, quantification of gene expression of *Il1b*, *Il6*, *Il10*, *Il17*, *C3*, *C4* and *C5* genes by quantitative PCR and promoter DNA methylation of *Il1b*, *Il6*, *Il10*, *Il17*, *C3*, *C4* and *C5* genes by pyrosequencing were carried out in all the study participants.

Results: Plasma levels of IL-1 β (Z score= 2.42, p=0.02) dropped significantly and C2 (Z score= 2.24, p=0.03) levels increased after 12-weeks of yoga therapy. The expression of *Il1b* (Z score=2.45, p=0.01) and *Il6* (Z score=2.07, p=0.04) genes were significantly downregulated, while the levels of *C4* (Z score=2.23, p=0.03) gene was upregulated in schizophrenia patients of yoga therapy group. Two CpG sites in the promoter region of *Il1b* (all p \leq 0.05) and *Il6* (all p \leq 0.05) genes and three CpG sites in the promoter region of *C4* (all p \leq 0.05) gene were hypermethylated, while two CpG sites in the gene body of *Il6* (all p \leq 0.05) gene and two CpG sites in the promoter region of *Il10* (all p \leq 0.05) gene were hypomethylated after 12-weeks of yoga therapy in schizophrenia patients.

Conclusions: Our findings provide important insights into the mode of action of yoga therapy in schizophrenia. This study for the first time reports the epigenetic effects of yoga therapy on immune-inflammatory pathway in schizophrenia.

Disclosure of Interest: None Declared

Psychopathology

O0015

Mental health competencies are stronger determinants of well-being than mental disorder symptoms even in psychiatric samples

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doi: 10.1192/j.eurpsy.2024.150

Introduction: Exploring the positive psychological and behavioural dimensions of people living with mental disorders can establish a firm ground in a therapeutic alliance for setting up positive life goals.

Objectives: The present study aimed to explore whether the strength of the mental health capacities and the severity of mental disorder symptoms and the interaction of the two differ in the strength of their associations with several dimensions of well-being on Hungarian adult psychiatric and non-clinical community samples.

Methods: The psychiatric sample (129 patients (44 male, 85 female)) was collected in four Hungarian healthcare facilities using a cross-sectional design. The non-clinical community sample (253 adults (43 male, 210 female)) was collected online using a cross-sectional design. All the respondents completed the Mental Health Test, six well-being and mental health measures, and the Symptom Checklist-90-Revised.

Results: Including both the mental health competencies and mental disorder symptoms variables in one regression model in both samples can predict patients' well-being even more accurately. Mental health competencies related positively; mental disorder symptoms connected negatively to subjective well-being. In all models and both samples, mental health competencies were found to be a stronger determinant of well-being than the mental disorder symptoms. The interaction of mental health functioning and mental disorders is no more predictive of well-being in either psychiatric or non-clinical samples than when the effects of each are considered separately.

Conclusions: The assessment of mental health competencies has an important predictive value for well-being in the presence of psychopathological symptoms and/or mental disorders.

Disclosure of Interest: None Declared

Psychopharmacology and Pharmacoeconomics

O0016

Use of Intranasal Oxytocin to Treat Adult Autism Spectrum Disorder: A Randomized Double Blind Controlled Trial

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doi: 10.1192/j.eurpsy.2024.151

Introduction: Autism Spectrum Disorder (ASD) is characterized by impairments in social interaction and restricted interests. It has been reported that oxytocin may improve processing of social cues and emotions in adults with ASD.

Objectives: The aim of this study was to evaluate the therapeutic effects and safety of intranasal oxytocin in this population.

Methods: Thirty-nine patients with ASD were randomly assigned to two groups: one group received intranasal oxytocin and the other group received a placebo, with 24 units administered every 12 hours for 8 weeks. The patients were evaluated using the Autism Quotient (AQ), Ritvo Autism Asperger Diagnostic Scale – Revised (RAADS-R), Social Responsiveness Scale (SRS), Clinical Global Impression (CGI), and World Health Organization Quality of Life-BREF (WHOQL-BREF) questionnaires at weeks 0, 4, and 8.

Results: The intervention group showed clinical improvements in RAADS-R ($P=0.010$), social communication subscale of SRS ($P=0.002$), CGI ($P=0.000$), physical ($P=0.004$), psychological ($P=0.006$), and social relationships ($P=0.046$) domains of WHOQL-BREF. Improvements reached their maximum at week 4 and were maintained until week 8 (Table 1).

Table 1. Effect of group, time time-group interaction and the effect size

| | Time | | Effect Size (Partial Eta Squared) | Group | | Effect Size (Partial Eta Squared) | Time-Group Interaction | | |
|-------------------------------------|-------|--------------|--------------------------------------|-------|---------|--------------------------------------|------------------------|--------------|--------------------------------------|
| | F | P-Value | | F | P-Value | | F | P-Value | Effect Size (Partial Eta Squared) |
| AQ | 19.44 | 0.000 | 0.344 | 0.391 | 0.536 | 0.01 | 2.63 | 0.079 | 0.066 |
| RAADS-R | 12.68 | 0.000 | 0.255 | 0.944 | 0.338 | 0.025 | 7.250 | 0.001 | 0.164 |
| SRS | 23.63 | 0.000 | 0.390 | 0.050 | 0.823 | 0.001 | 7.82 | 0.001 | 0.175 |
| WHOQL-BREF -Physical Health | 6.34 | 0.003 | 0.146 | 0.115 | 0.737 | 0.003 | 5.7 | 0.005 | 0.134 |
| WHOQL-BREF -Psychological Health | 8.31 | 0.001 | 0.183 | 0.048 | 0.828 | 0.001 | 6.14 | 0.003 | 0.142 |
| WHOQL-BREF -Social Relationships | 7.72 | 0.001 | 0.173 | 1.052 | 0.312 | 0.028 | 3.64 | 0.031 | 0.090 |
| WHOQL-BREF -Environmental Health | 4.87 | 0.010 | 0.116 | 0.162 | 0.690 | 0.004 | 2.69 | 0.074 | 0.068 |
| CGI | 22.08 | 0.000 | 0.374 | 2.28 | 0.139 | 0.058 | 9.42 | 0.004 | 0.203 |

AQ : Autism Spectrum Quotient, SRS : Social Responsiveness Scale, SCI : Social Communication Interaction, RRB : Restricted interest and repetitive behavior, WHOQL-BREF : World Health Organization Quality of life-BREF, CGI : Clinical Global Impression

Conclusions: The findings of this study suggest that nasal oxytocin therapy can significantly improve social skills and quality of life in individuals with ASD. Further research is needed to determine the timing and scope of oxytocin's effects across the lifespan.

Disclosure of Interest: None Declared

Sexual Medicine and Mental Health

O0017

Challenges of Sexuality Expression in Individuals with Autism Spectrum Disorder

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doi: 10.1192/j.eurpsy.2024.152

Introduction: Sexuality, although an essential component of human health, remains a controversial topic shrouded in stigma, particularly in the context of neurodiversity, which includes autism

spectrum disorder (ASD), where the expression of sexuality presents unique challenges. Autism and sexuality is a complex and multifaceted topic that involves understanding the unique ways in which individuals on the autism spectrum experience and express their sexuality.

Objectives: The purpose of this work is to address the complexity of the biopsychosocial sexuality components of people with autism, promoting a shift in the medical perspective, societal attitudes, and supporting greater inclusion of these individuals in current discussions regarding this area of human behavior and experience.

Methods: Evidence-based review, through research conducted on PubMed and selection of the most relevant studies on this topic, published in the last decade.

Results: Sexuality in autism is now recognized as a normative and integral aspect of development and functioning. Existing research suggests that most individuals with ASD display a clear interest in sexuality and relationships, with a study revealing that 96% of the ASD sample expressed an interest in sexuality. Individuals with high autistic traits tended to identify themselves more times as bisexual or presented a sexuality not definable within the categories of heterosexual. The relationship between autism and gender dysphoria is an area of ongoing research and discussion. Studies have suggested a higher prevalence of gender diverse identities and experiences within the autism community compared to the general population. Various hypotheses have been proposed to explain the increased gender and sexual diversity among individuals with autism. People with ASD may face unique challenges when it comes to their sexuality. The impairments in social skills and communication central to ASD potentially impact an autistic individual's expression and experience of sexuality by affecting their abilities to understand and interpret social cues, emotions, and nonverbal behaviors of others. Importantly, such individuals may be more vulnerable, as they may have different or even limited understanding of boundaries and consent. To address these challenges, it is important to acknowledge and respect the diversity of sexual experiences and desires among individuals with neuro(bio)logical differences. This can be done by providing accurate and inclusive sex education, creating safe spaces for such individuals to explore and express their sexuality, and working to address discrimination and abuse in intimate contexts.

Conclusions: Recognizing and respecting this diversity and fostering inclusive and accepting environments, we can help individuals with neurological differences to fully express and explore their sexuality and have satisfying sexual lives.

Disclosure of Interest: None Declared

O0018

Associations of sexual dysfunction with problematic pornography use and attachment styles: a cross-sectional study of Hungarian-Spanish samples.

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doi: 10.1192/j.eurpsy.2024.153