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Introduction: Sedentary behaviour is potentially a modifiable risk factor for depression and anxiety disorders, but findings have been inconsistent.

Objectives: To assess associations of sedentary behavior with depression and anxiety symptoms and estimate the impact of replacing daily time spent in sedentary behaviors with sleep, light, or moderate-to-vigorous physical activity, using novel compositional data analysis methods.

Methods: Prospective cohort study in with 60,235 UK Biobank participants (mean age: 56; 56% female). Exposure was baseline daily movement behaviours (accelerometer-assessed sedentary behaviour, physical activity, and self-reported total sleep). Outcomes were depression and anxiety symptoms (Patient Health Questionnaire-9 and Generalised Anxiety Disorders-7) at follow up.

Results: Replacing 60 minutes of sedentary behaviour with light activity, moderate-to-vigorous activity, and sleep was associated with lower depression symptom scores by 1·3% (95%CI, 0·4%-2·1%), 12·5% (95%CI, 11·4%-13·5%), and 7·6% (95%CI, 6·9%-8·4%), and lower odds of depression by 0·95 (95%CI, 0·94-0·96), 0·75 (95%CI, 0·74-0·76), and 0·90 (95%CI, 0·90-0·91) at follow-up. Replacing 60 minutes of sedentary behaviour with moderate-to-vigorous activity and sleep was associated with lower anxiety symptom scores by 6·6% (95%CI, 5·5%-7·6%) and 4·5% (95%CI, 3·7%-5·2%), and lower odds of meeting the threshold for an anxiety disorder by 0·90 (95%CI, 0·89-0·90) and 0·97 (95%CI, 0·96-0·97) at follow-up. However, replacing 60 minutes of sedentary behaviour with light activity was associated with higher anxiety symptom scores by 4·5% (95%CI, 3·7%-5·3%) and higher odds of an anxiety disorder by 1·07 (95%CI, 1·06-1·08).

Conclusions: Sedentary behaviour is a risk factor for increased depression and anxiety symptoms in adults, but different replacement activities differentially influence mental health.

Disclosure: No significant relationships.
Keywords: sedentary behaviour; Physical Activity; Depression; Anxiety

O148

Psychiatric morbidity among undergraduate students of university of Ilorin, Kwara state, Nigeria

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Introduction: The Nigerian tertiary education system admits mostly teenagers and young adults from different ethno-religious and family backgrounds, some of whom may have inherent risks and predisposition to mental illness. They then undergo stressful conditions related to the university life such as long durations of lectures, over-crowding, and lack of social amenities, haphazard lecture schedules as well as incessant industrial strike actions of academic and non- academic staff. In spite of these, there appears to be few studies on the burden of emotional and mental disorders among Nigerian University students, and none was cited suggesting interventions that may be appropriate.

Objectives: The objectives of the study is to determine the prevalence of psychiatric morbidity and its associated factors among undergraduate students of Univesity of Ilorin

Methods: This is a cross-sectional study using multi staged systematic randomization. A self-administered sociodemographic questionnaire and the 12 item general health questionnaire (GHQ -12) was administered on 3,300 students.

Results: Psychiatric morbidity was found to be 23.6% of the 3179 analyzable returned questionnaires. Factors found to be significantly associated with psychiatric morbidity included female gender, relationship with parents, parental employment status and family structure. Students on scholarship were more likely to have mental illness. Other associated factors include whether course of study was the preferred one and relationships with peers and lecturers on campus. About 46.6% of the students were willing to have internet based mental health intervention programmes.

Conclusions: The data obtained from this study is relevant for the formation of mental health promotion and prevention programs on our campus.

O149

Prolonged length of stay in acute psychiatric wards: A descriptive study

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Introduction: The psychiatric care paradigm has shifted towards community-centered models. Yet, prolonged hospitalizations are still a reality, with debated impact at healthcare systems and patients.

Objectives: This work aims to describe prolonged hospitalizations in acute psychiatric wards through patients' sociodemographic and clinical data.

Methods: We analyzed a national hospitalization database that contained all hospitalization episodes registered in Portuguese public hospitals from 2008 to 2015. All episodes with a primary diagnosis of mental disorder defined as ICD-9-CM codes 290.x-319.x were included. Prolonged hospitalizations were defined as having a LoS ≥ P97.5; LOS ≥180 days or LOS ≥1 year. Age, sex, lengh of stay, in-hospital mortality were analysed.

Results: The LoS ≥ P97.5(≥62 days) group comprised 3911 hospitalizations (2.3% of all psychiatric hospitalizations) and 1755 patients. The median LOS was 81 days and the mean age was 51 years. Sex was equally distributed, though a higher frequency of male patients was found on the ≥180 days (n=364) and ≥ 1 year (n=121) groups. Psychotic disorders were the main diagnosis at discharge (n= 1769, 45.2%), followed by mood disorders (n=1057, 27.0%) and dementia (n=451, 11.5%). In-hospital mortality increased in the higher LoS groups (1.1%; 4.4%; 9.1%, respectively).

Conclusions: Overall, middle aged patients with psychotic disorders represent most of the prolonged hospitalizations occurring in acute psychiatric wards. Community-based programs require further development to meet the existing needs.

O151

Gender differences in a forensic psychiatric ward: A retrospective study

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Introduction: The criminality associated with psychiatric disorders has been extensively studied with some studies showing a greater risk of violence in these patients. The gender differences in the general psychiatric population and can have an impact in the characteristics of a forensic population.

Objectives: The authors aim to study the gender differences regarding diagnosis, type of crime and other characteristics in a forensic ward population.

Methods: A retrospective study was designed, including patients admitted in the Forensic ward of Coimbra Hospital and University Center between 2018 and 2020.

Results: Our study included 110 patients, 19 women and 91 men. Although psychotic disorders were the most common in both groups, particularly schizophrenia, mood disorders were significantly more common in women, with a risk of 7,768. This was explained by a greater prevalence of depressive episodes in women. These were associated with a particular type of crime, infanticide, that was not found in the men group. This might contribute to a greater prevalence of violent crimes in women. There was a chance of committing crimes against the offspring of 24 in women. The use of psychoactive substances was significantly greater in men, with a chance of 12,906.

Conclusions: Considering that mood disorders are more common in women, these findings are easy to understand. The predominance of female perpetrators in infanticide is well described in the literature and can be associated with peripartum depression and gender roles. In this sample substance abuse was more common in man, like it's seen in the general population.

O152

Comorbidity with substance abuse and its influence in a forensic population: A retrospective study

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doi: 10.1192/j.eurpsy.2021.345

Introduction: The criminality associated with psychiatric disorders has been extensively studied with some studies showing a greater risk of violence in these patients. Substance abuse has been long linked to criminal and antisocial behaviours, but what happens when is in comorbidity with other psychiatric disorders.

Objectives: The authors aim to study the impact of substance abuse comorbidity in type of crime and other characteristics in a forensic ward population.

Methods: A retrospective study was designed, including patients admitted in the Forensic ward of Coimbra Hospital and University Center between 2018 and 2020.

Results: Our study included 110 patients, 39 of which had comorbidity with substance abuse. Although the authors couldn't find differences in the type of crime committed regarding the patient's primary diagnosis, substance abuse was significantly associated with non-violent crimes. The prevalence of homicide was significantly inferior in psychoactive substance users and the prevalence of domestic violence was significantly greater. However, the prevalence of a criminal history was significantly higher in patients with comorbidity with substance abuse. Patients with substance abuse had significantly higher childhood adverse events reports.

Conclusions: Interestingly, criminal behaviors prior to admission were more frequent in patients with substance abuse, which is understandable. However, the type of crimes were significantly less serious in this patients, which can mean that, although these consumptions are a risk factor for criminal behavior, the association in less important in crimes like murder. The exposition to childhood adverse events is a well-known risk factor for substance abuse in adulthood.

Genetics & molecular neurobiology

O153

The DRD2/ANKK1 Taq1A polymorphism in CYP2D6 extensive metabolizers is associated with the severity of extrapyramidal side effects of haloperidol treatment in schizophrenia spectrum disorders patients

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