specialist ED services collect routine outcome measures (ROMs) which serve to assess illness severity, patients' quality of life and function. The repeated collection of ROMs over the course of treatment allows for the objective evaluation of patient progress towards recovery. Recent National Health Service (NHS) guidance on adult ED care in England suggests that all services should use ROMs, not just to track progress, but also to support the achievement of collaboratively identified, person-specific recovery goals, to empower patients and inform individualised treatment. To achieve this objective, clinicians need access to psychometrically sound ROMs which can be utilised in a collaborative and person-centred manner. Traditionally, ROMs have been collected using standardised patient-reported outcome measures (PROMs), but increasingly individualised PROMs (i-PROMs) are also being developed. Methods & Findings: In this talk I will review the 'why, what and how' of ROMs, PROMs, I-PROMS and of associated normative and ipsative feedback on these measures in the eating disorders context. Conclusions: Use of PROMs has much to be commended both in regard to treating individual patients, at service level and also the wider health care system.

Disclosure: No significant relationships.

Keywords: Anorexia nervosa; patient-reported outcomes; feedback; bulimia nervosa

Preclinical and Clinical Factors and Outcome in Bipolar Disorders

S0018

Predictors of Functional Outcome in Patients with Bipolar Disorder

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Introduction Bipolar disorder is a severe disorder that is often accompanied by deficits in both neurocognitive (1) and psychosocial function (2). At the Department of Psychiatry and Psychotherapy of the Medical University of Vienna we performed a study to further identify potential cognitive, clinical and treatmentdependent predictors for functional impairment, symptom severity and early recurrence in bipolar patients (3). Methods Forty-three remitted bipolar patients and 40 healthy probands were assessed with a cognitive battery. In a randomized controlled trial, remitted patients were assigned to two treatment conditions as add-on to state-of-the-art pharmacotherapy: cognitive psychoeducational group therapy (CPEGT) over 14 weeks or treatment-as-usual. At 1 year after therapy, functional impairment and severity of symptoms were assessed. Results As compared to healthy probands, bipolar patients showed lower performance in executive function, sustained attention, verbal learning and verbal fluency. Both attention and CPEGT predicted occupational functioning. In our study verbal memory recall was a predictor for symptom severity. Discussion Our data suggest that bipolar patients benefit from CPEGT in the domain of occupational life. Implications for treatment strategies are discussed. Solé B, Jiménez E, Torrent C, Reinares M, Bonnin CDM, Torres I, Varo C, Grande I, Valls E, Salagre E, Sanchez-Moreno J, Martinez-Aran A, Carvalho AF, Vieta E. Int J Neuropsychopharmacol (2017) 20:670–80. Tohen M, Zarate CA Jr, Hennen J, Khalsa HM, Strakowski SM, Gebre-Medhin P, Salvatore P, Baldessarini RJ. Am J Psychiatry (2003) 160:2099–107. Sachs G, Berg A, Jagsch R, Lenz G, Erfurth A. Front Psychiatry (2020) 23;11:530026.

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Keywords: bipolar disorder; functional outcome; psychoeducation; Neurocognition

Disentangling Bipolar Disorders: Clinical and Neurobiological Markers of Disease Expression

S0019

The Genetic Underpinnings of Affective Temperaments: Identifying Novel Risk Variants with a Whole Genome Analytical Approach

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One reason behind the failure to understand the neurobiological background of affective disorders and develop more effective treatments is their heterogeneity warranting identification of clinically meaningful endophenotypes. Affective temperaments, considered subclinical manifestations and pathoplastic contributors of affective illnesses may constitute such endophenotypes. 775 general population subjects were phenotyped for affective temperaments using TEMPS-A, and genotyped using Illumina's CoreExom PsychChip yielding 573141 variants. Primary SNP-based association tests were calculated using linear regression models assuming an additive genetic effect with the first 10 calculated principal components, gender, age, and other affective temperaments as covariates; a Bonferroni-corrected genome-wide significance threshold set at $p \le 5.0 \times 10^{-8}$, and suggestive significance threshold set at $p \le 1.0 \times 10^{-7}$ SNP-level relevances were aggregated to gene-level with the PEGASUS method, with a Bonferroni-corrected significance level set at 2.0×10^{-6} , and suggestive significance thrshold set at $p \le 4.0 \times 10^{-4}$. Functional effects of most significant SNPs as reported in public open databases based on expression quantitative trait loci (eQTL) and 3D-chromatin interactions were explored using FUMA v1.3.5. In SNP-based tests a novel genome-wide significant variant, rs3798978 (p=4.44x10⁻⁸) and several other suggestively significant SNPs in ADGRB3 were found for anxious temperament along with suggestively significant SNPs for the other four affective temperaments. In gene-based tests suggestively significant findings emerged for all five temperaments. Functional analysis suggested