Introduction: Family studies provide the opportunity to investigate endophenotypes as a powerful neurobiological platform to better understand the underlying neurobiological mechanisms of schizophrenia spectrum disorders. Shared features between the patients and their first-degree relatives may shed some light on the path to identify potential causes of psychosis, and to implement preventive and therapeutic interventions.
Objectives: This study aimed to explore and compare neuropsychological measures in first episodes of psychosis (FEP) patients, their first-degree relatives and healthy controls (HC), participants on the PAFIP-FAMILIES project.
Methods: Statistical analyses were performed using one-way ANOVA, followed by multiple comparisons test where appropriate. Age, sex and years of education were introduced as covariates.
Results: From 387 eligible FEP patients enrolled in a previous cohort, 133 were included. In addition, 244 of their first-degree relatives (146 parents and 98 siblings) and 202 HC participated in this study (see Figure 1). In general, relatives showed an intermediate neuropsychological performance between the HC and the FEP patients (see Figure 2). Specifically, siblings performed similar to HC in the domains verbal memory, visual memory, working memory, motor dexterity and theory of mind, since their values practically overlap those of HC. The parents presented significant deficits, similar to that of the affected individuals, in executive functions and attention domains.

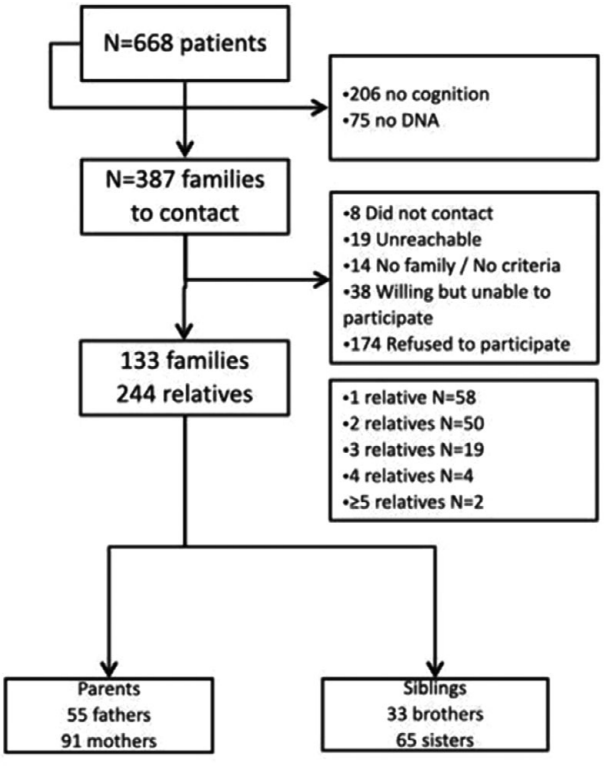

Figure 1. Flow diagram for patients and their first-degree relatives.

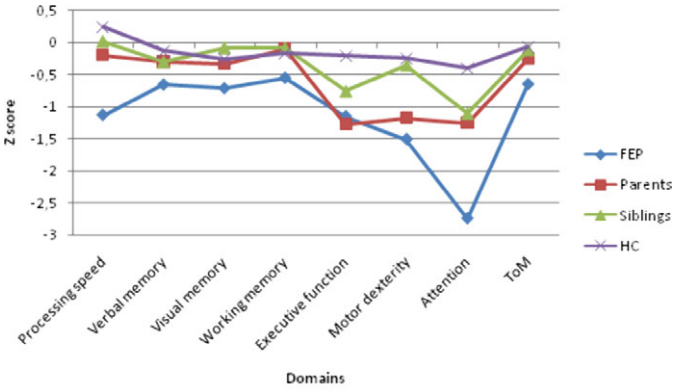

Figure 2. Neurocognitive profile of the participants.

Conclusions: These findings suggest that executive and attention dysfunction might have a greater family aggregation and could be a relevant cognitive endophenotype for psychotic disorders. The study shows the potential of exploring intra-family neuropsychological performance supporting neurobiological and genetic research in schizophrenia.

Disclosure: No significant relationships.
Keywords: First episode of psychosis; Neurocognitive endophenotype; schizophrénia; First-degree relatives

Mood Disorders

O0121

Antidepressant discontinuation manias: a new bipolar subtype?

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doi: 10.1192/j.eurpsy.2022.309

Introduction: Antidepressant withdrawal manic states are rare and controversial phenomena. The underlying pathophysiology and the clinical implications have not been thoroughly discussed in the literature.
Objectives: We aimed to review reports of antidepressant discontinuation manic states and to discuss the different hypothetical pathophysiological changes underlying this phenomenon. We also argued in favor of its inclusion in the bipolar spectrum.
Methods: We searched Pubmed using the key words: 'antidepressant withdrawal' or 'antidepressant discontinuation' plus 'mania' or 'hypomania' from January 2008 until January 2018.
Results: Twenty-nine cases of antidepressant discontinuation manic states were identified. Hypotheses involve the implication of Catecholamines, Acetylcholine and Serotonin in the pathophysiology of this paradoxical phenomenon. The search for red flags for bipolar disorder in these case reports revealed psychiatric histories in favor of a bipolar spectrum disorder in 12 individuals while five were already known to have bipolar disorder.

Conclusions: Antidepressant discontinuation mania should be considered on the bipolar spectrum.

Disclosure: No significant relationships.
Keywords: antidepressant; discontinuation; bipolar III 1/4; mania

O0123

Tryptophan metabolism in bipolar disorder

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doi: 10.1192/j.eurpsy.2022.310

Introduction: Immune mediated inflammatory processes are involved in the aetiopathogenesis of bipolar disorder (BD) and weight associated comorbidities. Tryptophan breakdown via indoleamine 2,3-dioxygenase-1 (IDO-1) along the kynurenine axis concomitant with a pro-inflammatory state was found more active in BD but also associated with overweight/obesity.
Objectives: Aims of our study were to investigate 1.) the tryptophan metabolism in BD compared to mentally healthy controls, 2.) differences in weight classes, 3.) in a longitudinal setting, dependent on the incidence of BD episodes and euthymia.
Methods: At the Medical University Graz anthropometric and clinical data as well as peripheral tryptophan and kynurenine were assessed in serum samples of 226 individuals with BD and 142 controls. For 75 individuals with BD a longitudinal assessment with three samples was performed. Serum concentrations of tryptophan and kynurenine were determined by reverse-phase high-performance liquid chromatography. The kynurenine/tryptophan was used as a proxy for IDO-1 activity.
Results: showed a higher kynurenine/tryptophan ratio in BD compared to controls and in overweight compared to normal weight persons. Levels remained stable over time. In the longitudinal course, no differences were found between individuals who were constantly euthymic or not as well who had an illness episode or none.
Conclusions: Findings indicate that IDO-1 activity might constitute more a trait and not a state marker of BD. Accelerated tryptophan breakdown along the kynurenine axis may be further facilitated by overweight. This may increase the risk of accumulation of neurotoxic metabolites which impacts BD symptomatology, cognition, and somatic comorbidities.

Disclosure: No significant relationships.

O0124

The Effect of Sleep Disorders on Sexual Function in Bipolar Disorder in the Remission Period

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doi: 10.1192/j.eurpsy.2022.311

Introduction: Bipolar Disorder(BD) is a common,severe and recurrent disease with significant effects on functionality. Residual symptoms such as sleep disturbance and sexual dysfunction are defined as predictors of poor functioning in remission.
Objectives: The aim of this study was to investigate the correlation between sleep disorder and severity of sexual dysfunction in patients with BD in remission.
Methods: The study was conducted with 100 female and 100 male BD patients in remission. The sociodemographic and clinical characteristics were recorded by interview with the patients and the patients were given the Young Mania Rating Scale(YMRS),-Hamilton Depression Rating Scale(HAM-D),Pittsburg Sleep Quality Index(PSQI),Epworth Sleepiness Scale(ESS),Female Sexual Function Scale(FSFI) and International Index of Erectile Function(IIFF-15)for the assesment of symptom severity.
Results: The frequency of “sleep disorder” was 45.5% and the frequency of ”daytime sleepiness” was 5.5%.In women the mean FSFI score was 26.06±5.14 and sexual dysfunction frequency was 48%.In men,the mean IIEF score was 59.63±8.34 and erectile dysfunction frequency was 56%. There was a statistically significant negative correlation between total FSFI score with HAM-D($r=-0.592$, $p<0.001$),ESS ($r=-0.330$, $p=0.001$)and PSQI($r=-0.557$, $p<0.001$)and between total IIEF score with HAM-D($r=-0.509$, $p<0.001$),ESS($r=-0.361$, $p<0.001$)and PSQI($r=-0.511$,$p<0.001$). Sexual function scores in both women and men with sleep problems were significantly lower than those without sleep problems (23.56±4.71vs.28.56±4.31and53.88±7.10vs.63.80±6.56 respectively). Multiple linear regression analysis also showed that total sleep quality scores were an effective factor on sexual function in women(OR:2.74,%95CI[0,799-0,127];p=0,007) and men(OR:2.45, %95CI[1.577-0.164];p=0,016) with BD.
Conclusions: There was an increased incidence of sexual dysfunction in bipolar patients with sleep disorders.Treatment of sleep disorders is important for improving sexual function in bipolar patients for both genders.

Disclosure: No significant relationships.
Keywords: Bipolar Disorder; Sleep Disorder; Sexual Dysfunction

O0125

Bipolar Stigma in Jewish Communities in the United States

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doi: 10.1192/j.eurpsy.2022.312

Introduction: This study investigated differences in mood disorder public stigma endorsed by Jewish adults. Specifically, it examined