

Objectives: The aim of the study was to assess whether psychosocial and personality variables significantly differ between the group of preferential and non-preferential sexual offenders.

Methods: The study involved 120 persons, including 60 preferential and 60 non-preferential sexual offenders. The participants were presented with selected, standardized psychological tools to personality traits, self-esteem, life satisfaction, capacity to understand emotions, attachment style.

Results: The study involved 120 persons, including 60 preferential and 60 non-preferential sexual offenders. The participants were presented with selected, standardized psychological tools to personality traits, self-esteem, life satisfaction, capacity to understand emotions, attachment style.

Conclusions: Differences between the both study groups and the male standardization sample suggest worse psychosocial functioning of sexual offenders. A critical analysis of the methodological limitations of this study have been presented.

Conflict of interest: Scientific work was financed from the budget for science in the years 2017-2021, as a research project DI 16/003046 under the programme „Diamond Grant”.

Keywords: paraphilic disorder; Big Five personality traits

EPP0697

Changes in BMI and blood pressure after implementing a complete smoking ban in a medium secure forensic setting: A study from dundrum hospital dublin

A. Roarty^{1*}, H. Kennedy² and M. Davoren¹

¹Forensic Psychiatry, National Forensic Mental Health Service, Central Mental Hospital, Dundrum, Dublin, Ireland and ²Department Of Psychiatry, Trinity College- Dublin University, Dublin, Ireland

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1021

Introduction: In February 2020, the Central Mental Hospital Dundrum moved to a complete ban on cigarette smoking. Concerns were raised that this might represent a ‘restrictive practice’ and that patients might gain weight or see changes in their blood pressure if they were not permitted to smoke.

Objectives: The aim of the study was to ascertain if there were changes in the blood pressure readings or body mass index of a group of patients in a secure forensic hospital after the implementation of a complete campus-wide smoking ban

Methods: All patients (n=20) working with one medium cluster team were included in the study. Demographic details and data pertaining to legal status, diagnosis and length of stay in the hospital were obtained. BMI, blood pressure and medications were reviewed at the time of introduction of the smoking ban, 1st February 2020 and again 5 months later.

Results: All those included in the study were male. The median age was 35 years, most common diagnosis was schizophrenia and mean length of stay was 4.23 years. 20% of patients were prescribed anti-hypertensives at the time of introduction of the smoking ban. All of the patients on anti-hypertensives were overweight. At follow up there was no increase in BMI noted in the patient group. Two patients had dose reductions in anti-hypertensives, three had discontinuation of bronchodilators.

Conclusions: Introducing a campus wide smoking ban in a secure forensic psychiatric hospital is both clinically positive and practically possible. There was no noted increase in incidents in the hospital during this period.

Keywords: smoking cessation; medium secure; Blood pressure; BMI

EPP0698

Involuntary placement of a mentally ill person in a psychiatric hospital and care institution

A. Arold^{1*} and J. Kostomarov²

¹C, Marienthali Kliinik, Tallinn, Estonia and ²Law, University of Tartu, Tartu, Estonia

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1022

Introduction: In the mental health area, the most problematic issues are the involuntary placement of the mentally ill in closed institutions, both under civil and criminal proceedings, and their involuntary treatment. Despite the international efforts of harmonizing measures, the nature and practice of the services still vary from country to country.

Objectives: To analyse involuntary placement of persons with mental disorders in closed institutions under civil and criminal proceedings, which include both psychiatric hospitals and care institutions.

Methods: Review and analysis of regulations and practice of involuntary placement of a person with a mental disorder in a closed institution in the context of Estonian, Finnish, Russian, and English law, health care and social system.

Results: Estonian, Finnish, Russian, and English law distinguish between criminal and civil proceedings regarding involuntary placement of a mentally ill person in a closed institution. However, specifics of the proceedings are different among the countries, e.g. judicial involvement, and deadlines. Also, the provision of forensic mental health services differ among these countries, e.g. in Estonia offenders and non-offenders are kept separately, whilst in England and Russia patients are not distinguished so strictly.

Conclusions: The distinction between involuntary placement of the mentally ill in criminal and civil proceedings is distinguished primarily for the reason that in one case the risk arising from the person is directly realized by committing an unlawful act and in the other case the risk arising from the person is directed at themselves or is not qualified as an unlawful act.

Keywords: involuntary placement; mental health; psychiatry; mental health legislation

EPP0699

Vexatious litigant vs paranoia querulans: A systematic review

J. Pinzón-Espinosa^{1,2,3*}, A. González-Rodríguez⁴, A. Guàrdia⁵, M. Betriu Sabaté⁶, P. Manozzo-Hernandez⁵, A. Alvarez Pedrero⁷, S. Acebillo⁷, J. Labad⁸ and D. Palao Vidal⁴

¹Salut Mental Taulí, Parc Taulí Hospital Universitari, Sabadell, Spain; ²Department Of Clinical Psychiatry, School of Medicine, University of Panama, Panama City, Panama; ³Department Of Medicine, School of Medicine, University of Barcelona, Barcelona, Spain; ⁴Mental Health, Parc Taulí University Hospital. Autonomous University of Barcelona (UAB). I3PT. CIBERSAM, Sabadell, Spain; ⁵Mental Health, Parc Taulí-University Hospital, Sabadell, Spain; ⁶Mental Health, Parc Taulí University Hospital, Sabadell, Spain; ⁷Mental Health, Parc Taulí University Hospital. Autonomous University of Barcelona (UAB). I3PT, Sabadell, Spain and ⁸Mental Health, Hospital of Mataró. Consorci Sanitari del Maresme. CIBERSAM., Mataró, Spain

*Corresponding author.
doi: 10.1192/j.eurpsy.2021.1023

Introduction: Paranoia querulans is a type of persistent delusional disorder of the persecutory subtype, recognized under ICD-10 and DSM-IV. Being a classically described entity, evidence is lacking from its conceptualization as a nosological entity to diagnosis and treatment. Furthermore, controversy still exists regarding its interplay between the judicial and mental health systems.

Objectives: To summarize current evidence and knowledge regarding Paranoia querulans on its conceptualization, etiopathological explanations, therapeutic management and interface between psychiatry and the law.

Methods: A systematic review was undertaken between June and October 2020 in the PubMed, Web of Science and Scopus databases according to PRISMA directive. Key-terms: ((querul* OR vexatious) AND (paranoia OR delusio* OR neuros* OR behavi* OR complai*) OR litig*) AND psychiatry. No language or time restrictions were established.

Results: A total of 1648 studies were initially identified (PubMed: 679; WOS: 945; Scopus: 24; other: 0); after duplicates were removed, n=1381 studies remained. After screening title and abstract, 56 studies were included. Their main content was categorized into: 1. Conceptualization (n=26): Neurosis (n=5), psychosis (n=9), behavioral disorder (n=5); no psychiatric diagnosis (n=7). 2. Descriptive psychopathology (n=8) 3. Etiopathogenesis (n=9): Social or personality basis (n=3), culture (n=4), trauma (n=1), cognitive decline (n=1) 4. Management (n=1) 5. Psychiatry and Law: same object, different objectives (n=12)

Conclusions: There is controversy regarding the nosological entity of querulousness, from psychosis to neurosis or behavioral disorders. Some authors consider this behavior to not be a psychiatric diagnosis. Furthermore, most papers dealt with a social or nurture-based origin. There is a dearth of information regarding treatment.

Conflict of interest: JPE has received CME-related fees from Lundbeck.

Keywords: Paranoia querulans; Vexatious litigant; Psychiatry and Law; Delusional disorder

Genetics & molecular neurobiology

EPP0700

Systematic review of economic evaluation studies in psychiatric pharmacogenomics

C. Mitropoulou¹, K. Karamperis¹, M. Koromina², P. Papantoniou³, M. Skokou², F. Kanellakis², K. Mitropoulos^{4*} and A. Vozikis⁵

¹Research And Development, The Golden Helix Foundation, London, United Kingdom; ²Pharmacy, University of Patras, Patras, Greece;

³Economics, Warwick School of Business, London, United Kingdom;

⁴Medical School, University of Athens, Athens, Greece and

⁵Economics, University of Piraeus, Piraeus, Greece

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1024

Introduction: Nowadays, many relevant gene-drug associations have been discovered, but pharmacogenomics (PGx)-guided treatment needs to be cost-effective as well as clinically beneficial to be incorporated into standard health-care.

Objectives: To address current challenges, this systematic review provides an update regarding previously published studies, which assessed the cost-effectiveness of pharmacogenomics testing for the prescription of antidepressants and antipsychotics.

Methods: Our initial screening revealed 1159 articles, which was subsequently reduced to 32 articles, deducted by analysis of their abstract. Full-text analysis performed by all authors resulted in 18 papers that were further included in the analysis.

Results: Of the 18 studies evaluations, 16 studies (88.89%) drew conclusions in favor of PGx testing, of which 9 (50%) were cost-effective and 7 (38.9%) were less costly based on cost analysis. In brief, we found sufficient evidence on the cost-effectiveness of PGx in psychiatric disease care. More precisely, supportive evidence exists for CYP2D6 and CYP2C19 gene-drug associations and for combinatorial PGx panels, but evidence is limited for many other drug-gene combinations. Amongst the limitations of the field are the unclear explanation of perspective and cost inputs in many economic studies, as well as the underreporting of study design elements, which can influence significantly the economic evaluations.

Conclusions: Overall, this systematic review highlights the need for additional research on economic evaluations of PGx implementation with an emphasis on psychiatric pharmacogenomics.

Keywords: Pharmacogenomics; Cost-effectiveness analysis; cost analysis; Systematic review

EPP0705

The role of GSK-3 in mood disorders: Preliminary data from an experimental study

G. Di Salvo^{1*}, G. Rosso¹, E. Hoxha², E. Teobaldi¹, I. Balbo², F. Tempia² and G. Maina¹

¹Department Of Neurosciences Rita Levi Montalcini, University of Turin, Turin, Italy and ²Neuroscience Institute Cavalieri Ottolenghi (nico), Department of Neuroscience, Turin, Italy

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1025

Introduction: The identification of potential biomarkers is crucial to improve the management and treatment of mood disorders. Glycogen synthase kinase-3 (GSK-3) is a multifunctional enzyme with an important role in the etiology of mood disorders. Recent findings suggested GSK-3 as a putative biomarker in mood disorders.

Objectives: The aims of the study are: - to evaluate GSK3 as potential biomarker for differential diagnosis (MDD and BD); - to analyze the regulation of GSK3 by psychopharmacological treatments.

Methods: Patients included fulfill the following criteria: (a) principal diagnosis of MDD or BD (DSM-5); (b) age \geq 18 years; (c) drug-free for at least 4 weeks before the inclusion. For each patient included a healthy control is enrolled, matched by gender and age. All included subjects at the study entry point (t0) are assessed through: - semistructured clinical interview and clinical rating scales (Hamilton Depression Rating Scale, Hamilton Anxiety Rating Scale; Young Mania Rating Scale, Clinical Global Impression) - blood draw, to measure GSK-3 levels. Patients with MDD or BD are assessed again after 1 week (T1) and after 2 month (T2) of specific pharmacological treatment.

Results: So far, we enrolled 16 patients and 16 healthy controls. The enrollment is still ongoing.

Conclusions: We expect to find GSK-3 levels differently expressed between healthy controls, patients with DDM and patients with BD. This finding would be crucial as it could contribute to the improvement of differential diagnosis. Moreover, we expect to observe a change in GSK-3 levels after psychopharmacological treatments.