S0047

Predictors of Therapy Outcome in Eating Disorders: from Psychopathology to Personality

F. Fernandez-Aranda[1,2,3,4]*, S. Jimenez-Murcia[4] and R. Granero[5]

[1]University Hospital of Bellvitge,-IDIBELL, Department Of Psychiatry, Barcelona, Spain; [2]Hospital Universitario de Bellvitge, Psiquiatría, Bracelona, Spain; [3]School of Medicine and Health Sciences, University of Barcelona, Department Of Clinical Sciences, Barcelona -Campus Bellvitge, Spain; [4]University Hospital of Bellvitge-IDIBELL and CIBERobn, Department Of Psychiatry, Barcelona, Spain and [5]University Autonoma Barcelona, Department Of Psychobiology And Methodology, Bellaterra, Spain
*Corresponding author.
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Eating disorders are severe mental disorders, with high mortality rates and high incidence in adolescence and early adulthood, especially in women. The course of these disorders is uncertain and treatment outcomes are limited. Several factors such as duration of the disorder, dysfunctional personality traits and cognitive profiles, as well as genetic vulnerabilities, will influence adherence and response to treatment. In this presentation we will include recent results on prospective observational studies, analyzing personality and cognitive predictors of treatment response in eating disorders, as well as potential associated neurobiomarkers.

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Keywords: Eating Disorders; Psychotherapy; predictors; personality

Anxiety Disorders in Pregnancy and the Postnatal Period: Recent Progress and Lived Experience

S0044

Anxiety Disorders in the Perinatal Period

L. Mcdonald

Royal College of Psychiatrists, Dept Of Professional Standards, London, United Kingdom
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Anxiety disorders are common in pregnancy and in the post-natal period. This presentation will focus on how anxiety disorders may present in the perinatal period, the need for accurate and timely diagnosis, and barriers to diagnosis and barriers for women in accessing appropriate care and treatment.

Disclosure: No significant relationships.
Keywords: Perinatal; maternal OCD; Anxiety

S0045

Perinatal OCD - A Lived Experience

D. Wilson

Maternal OCD, Support, London, United Kingdom
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• Diana discusses the terror of perinatal ocd undiagnosed with four small children ages six years and under
• Diana explains fearing seeking help and seeing a psychiatrist knowing she would have to disclose her thoughts and images she encountered daily
• She pinpoints what moved her forward and stresses the importance of revisiting ocd when it is not in your life
• She talks of hope and through successful CBT and Citalipram, has been free of the disorder for twenty years

Disclosure: No significant relationships.

S0046

Postnatal PTSD: Risks and Consequences

W. El-Hage

Université de Tours, Centre Régional De Psychotraumatologie Cvl, Tours, France
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Post-traumatic stress disorder (PTSD) occurs in 4% of all pregnancies during the postnatal period. This prevalence can increase in high-risk groups reaching a mean prevalence of 18%. Some risk factors are significantly associated with the development or exacerbation of postnatal PTSD, including prenatal depression and anxiety, pre-pregnancy history of psychiatric disorders, history of sexual trauma, intimate partner violence, emergency childbirth, distressing events during childbirth and psychosocial attributes. Maternal postnatal PTSD is highly associated with the difficulties in mother-infant bond and the postpartum depression. Evidence shows significant links between psychological, traumatic and birth-related risk factors as well as the perceived social support and PTSD following childbirth. The City Birth Trauma Scale can be recommended as a universal instrument for diagnosis of postnatal PTSD.

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Keywords: postnatal; Childbirth; Post-traumatic stress disorder

Modelling Trauma and Resilience

S0047

"Adding new Molecular Insights to a given Endophenotype: the Relevance of Epigenetics in Environmental Stress Response"

F. Rusconi[1,2]*, E. Romito[1], E. Toffolo[1], C. Forastieri[1] and E. Battaglioli[1]

[1]University of Milan, Dep. Medical Biotechnology And Translational Medicine, SEGRATE, Italy and [2]University of Milan, Dep Medical Biotechnology And Translational Med., Segrate, Italy
*Corresponding author.
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Molecular psychiatry research needs a deeper characterization of emotional and cognitive neural underpinnings, along with a broader recognition of trauma-related circuitries and their involvement in shared pathological endophenotypes. One such endophenotype is unbalanced approach avoidance conflict (AAC), a highly

recurrent trait of psychopathology. A translationally validated rodent model of AAC is the elevated plus maze (EPM) test, recently shown to be pharmacologically controlled in human and rodents via homologous neural substrates. Thanks to this test, we identified the involvement of the epigenetic enzyme LSD1 as a molecular restrainer of anxiety. We identified LSD1 aberrant regulation within the hippocampus of suicidal victims, suggesting its broad functional involvement in maladaptive behaviors. Interestingly, thanks to the parallel employment of rodent models, we evaluated a stress-related LSD1 homeostatic regulation that transiently limits memory formation-instrumental gene expression in the hippocampus upon trauma. Our work shed new light on epigenetic processes devoted to trauma resiliency through a negative regulation of anxiety plasticity.

Disclosure: No significant relationships.
Keywords: Trauma; epigenetics; Lysine Specific Demethylase 1; Hippocampus

S0048

"Neural Network Responses to Traumatic Stress Predicting its Longterm Consequences"

B. Dirven[1], M. Negwer[2], J. Grandjean[1,3], J. Homberg[1], T. Kozicz[4,5,6] and M. Henckens[1*]

[1]Radboud University Medical Center, Cognitive Neuroscience, Nijmegen, Netherlands; [2]Radboud University Medical Center, Human Genetics, Nijmegen, Netherlands; [3]Radboud University Medical Center, Radiology And Nuclear Medicine, Nijmegen, Netherlands; [4]Mayo Clinic, Laboratory Medicine And Pathology, Rochester, United States of America; [5]Mayo Clinic, Department Of Clinical Genomics, Rochester, United States of America and [6]Radboud University Medical Center, Medical Imaging, Nijmegen, Netherlands
*Corresponding author.
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Adaptive responding to severe stress or trauma requires an optimized reconfiguration in the activity of large-scale neural networks. In vulnerable individuals, this response can go awry, inducing long-term consequences on mental health, such as posttraumatic stress disorder (PTSD). Improved understanding of the neurobiological mechanisms underlying this maladaptive neural response to trauma might benefit early intervention (i.e., secondary prevention) options in stress-related psychopathology. Yet, because of obvious ethical limitations these acute responses to trauma are inaccessible in humans. Therefore, we here used a mouse model for PTSD to investigate adaptive vs. maladaptive neural responding to trauma, the latter leading to long-term behavioral consequences mimicking symptoms observed in PTSD patients. By using transgenic mice, we were able to fluorescently label all activated neurons during trauma exposure, and relate these activation patterns to later PTSD-like symptomatology. We observed increased neuronal activity in sensory-processing and memory-related areas of mice vulnerable to the long-term consequences of trauma exposure, compared to resilient mice. Moreover, vulnerable mice displayed increased functional connectivity between the default mode network and lateral cortical network (a proxy for the central executive network in humans) during trauma processing relative to resilient mice. As such, these findings provide first insight in how a maladaptive neural response to trauma can result in later symptoms of psychopathology.

Disclosure: No significant relationships.
Keywords: neural networks; animal model; resilience; PTSD

Long and Short Term Post COVID-19 Neuropsychiatric Disorders: From Clinics to Neuroimaging

S0049

"Delirium and COVID-19": From Symptomatology to Laboratorial and Neuroimaging Findings"

D. Telles Correia[1*] and F. Novais[2]
[1]FACULDADE DE MEDICINA UNIVERSIDADE DE LISBOA, Psychiatry, Lisboa, Portugal and [2]Lisbon University, Faculty Of Medicine, Lisbon, Portugal
*Corresponding author.
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Introduction: The infection caused by the SARS-CoV-2 virus called COVID-19 may affect not only the respiratory system but also the central nervous system (CNS). Delirium is a frequent and serious condition in COVID-19 patients and may be caused by the direct invasion of the CNS or the induction of CNS inflammatory mediators or by indirect effects due to the systemic inflammatory status, other organ failure, prolonged mechanical ventilation time, immobilization but also social isolation. We aim to critically review literature reporting this syndrome in patients infected by the SARS-CoV-2 virus with a particular emphasis on reported clinical, laboratorial and neuroimaging findings. Methods: A state-of-the-art literature review was performed using PubMed, Embase and Web of Knowledge using the following keywords: delirium, COVID-19, SARS-Cov-2, neuroimaging, laboratorial findings. Results: More than 50% of patients with COVID-19 may present with delirium and in about 20% of the cases this is the primary presentation of the disorder. Previous data suggests that these patients may show a higher frequency of certain symptoms such as agitation, myoclonus, abulia, and alogia. Some distinct neuroinflammatory syndromes have been identified in patients presenting with delirium associated with the virus, namely, autoimmune encephalitis, Acute Disseminated Encephalomyelitis (ADEM) and stroke showing its potential for CNS involvement. Many of these patients present normal brain imaging, EEG and CSF findings but others have more specific laboratorial changes such as elevated creatinine kinase, elevated D-dimer levels, abnormal coagulation parameters and positive SARS-Cov-2 PCR in CSF or meningeal enhancement, ischemic stroke and perfusion changes in MRI imaging.

Disclosure: No significant relationships.
Keywords: COVID-19; Delirium; Laboratory findings; neuroimaging findings

S0050

Social Isolation and its Brain Correlations: From Symptomatology to Neuroimaging Findings

M. Bellani
University of Verona, Department Of Neurosciences Biomedicine And Movement Sciences, Verona, Italy
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