Objectives: This study examines satisfaction with social connectedness (SSC) as predictor of positive and negative symptoms in people with a psychotic disorder.
Methods: Data from the Pharmacotherapy Monitoring and Outcome Survey (PHAMOUS, 2014-2019) was used from patients diagnosed with a psychotic disorder (N=2109). Items about social connectedness of the Manchester short assessment of Quality of Life (ManSA) were used to measure SSC. Linear mixed models were used to estimate the association of SSC with the Positive and Negative Syndrome Scale (PANSS) after one and two years against $\alpha=0.01$. Analyses were adjusted for symptoms, time since onset, gender and age. Additionally, fluctuation of positive and negative symptom scores over time was estimated.
Results: Mean duration of illness of the sample was 18.8 years (SD 10.7) with >65% showing only small variation in positive and negative symptoms over a two to five-year time period. After adjustment for covariates, SSC showed to be negatively associated with positive symptoms after one year ($\beta=-0.47$, $p<0.001$, 95% CI =-0.70,-0.25) and two years ($\beta=-0.59$, $p<0.001$, 95% CI = -0.88,-0.30), and for negative symptoms after one year ($\beta=-0.52$, $p<0.001$, 95% CI = -0.77,-0.27). The prediction of negative symptoms was not significant at two years.
Conclusions: This research indicates that interventions on SSC might positively impact mental health for people with psychosis. SSC is a small and robust predictor of future levels of positive symptoms. Negative symptoms could be predicted by SSC at one year.

Disclosure: No significant relationships.
Keywords: social connectedness; PSYCHOTIC DISORDERS; positive symptoms; negative symptoms

O0144

DiscoVR: results of a multicenter RCT on a social cognitive virtual reality training to enhance social cognition in psychosis

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Introduction: Functional deficits, that is, problems in fulfilling appropriate social roles in daily life, are very common in people with a psychotic disorder. In recent years, Virtual Reality (VR) has emerged as a potential tool to improve SCT. Our research group has developed an immersive VR-SCT ('Dynamic Interactive Social Cognition Training in Virtual Reality': 'DiSCoVR').
Objectives: To evaluate to effects of a VR-based social cognition training (SCT) for people with a psychotic disorder.
Methods: This intervention was compared the an active VR-control condition in a multicenter RCT. Both interventions contained sixteen individual 45-60-minute on-site sessions, administered twice a week. Main study outcomes are social cognition and social functioning in daily life assessed with experience sampling.
Results: From baseline to post-treatment (n=72), none of the time*group interactions were significant, indicating an absence of treatment effects. A significant effect of time was observed for the SERS total score (b=9.84, 95% CI=3.81-15.87, p=.002), indicating overall improvement in self-esteem.
Conclusions: We did not find any significant treatment effects. An effect of time on self-esteem was found at post-treatment, but not follow-up, suggesting a temporary improvement in self-esteem in both groups. One way to interpret these results is that, contrary to other SCT interventions, DiSCoVR does not improve social cognition or social functioning. This could be due to characteristics of the treatment protocol. Another possibility is that, contrary to the premise of VR-SCT, our VR environments inadequately simulated reality. Adapting an established protocol to VR, could further elucidate the merit of VR as a training method.

Disclosure: No significant relationships.
Keywords: virtual reality; social cognition; Psychosis; Treatment

O0145

Alcohol-induced psychotic disorder: a study of hospitalized patients in Lisbon

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Introduction: While alcohol-induced psychotic disorder (AIPD) is a well-recognised clinical disorder, relativery little is known about aspects such as epidemiology, course and treatment of the condition. Current evidence suggests AIPD can be clinically distinguised from alcohol-withdrawal delirium and schizophrenia. AIPD is associated with high comorbidity with other psychiatric disorders, high re-hospitalization and mortality rate, namely suicidal behaviour.
Objectives: The objetive of the study was to examine the correlates, clinical features, psycopathology, and short-term response in an inpatient sample with alcohol-induced psychotic disorder, predominant hallucinations (ICD-10 F10.52) admitted to Centro Hospitalar Psiquiátrico de Lisboa.
Methods: We collected retrospectively data from all admitted patients to our Alcohol Unit between January 2010 and January 2020 with the diagnosis of AIPD. The exclusion criteria were: presence of preexisting psychotic disorder, delirium, or other substance use disorders. We characterized our sample in Demographic categories, Clinical categories, Treatment and Short-term course.
Results: A total of 113 subjects were included in the study. The prevalance of alcoholic hallucinosis was found to be 1.3% of all patients who received inpatient treatment. Most individuals reported auditory hallucinations, that iniciated when they

decrease their alcohol intake, and 1 in 4 had past episodes of AIPD.
Conclusions: There are specific challenges in studiyng AIPD, such as the relatively rarity of the disorder, its often transient nature and high levels of comorbidity. A high degree of recurrence and morbidity indicates a need to prevent, and intervene early with an abstinent-oriented management goal.

Disclosure: No significant relationships.
Keywords: anti-psychotic treatment; alcohol-induced psychotic disorder; alcohol hallucinosis; alcohol-withdrawal

O0146

Difference in spectral power density of sleep electroencephalography in individuals with or without insomnia

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Introduction: Power spectral analysis is the most common method of quantitative electroencephalogram (qEEG) techniques and enables investigation of the microstructure of insomnia. Previous spectral analysis studies on insomnia have shown inconsistent results due to their heterogeneity and small sample sizes.
Objectives: We compared the difference of electroencephalogram (EEG) spectral power during sleep among participants without insomnia, insomniacs with no hypnotic use, hypnotic users with no insomnia complaints, and hypnotic users with insomnia complaints.
Methods: We used the Sleep Heart Health Study data, which is large sample size and has good quality control. The fast Fourier transformation was used to calculate the EEG power spectrum for total sleep duration within contiguous 30-second epochs of sleep. For 1,985 participants, EEG spectral power was compared among the groups while adjusting for potential confounding factors that could affect sleep EEG.
Results: The power spectra during total sleep differed significantly among the groups in all frequency bands (p corr < 0.001). We found that quantitative EEG spectral power in the beta and sigma bands of total sleep differed (p corr < 0.001) between participants without insomnia and hypnotic users with insomnia complaints after controlling for potential confounders. The higher beta and sigma power were found in the hypnotic users with insomnia complaints than in the non-insomnia participants.
Conclusions: This study suggests differences in the microstructures of polysomnography-derived sleep EEG between the insomnia groups.

Disclosure: No significant relationships.
Keywords: Insomnia; spectral power density; beta power; qEEG

O0147

CYP2C19 expression modulates affective functioning and brain anatomy – a large single-center community-dwelling cohort study

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Introduction: The association between CYP2C19 poor metabolizer status, depressive symptom severity and hippocampal volume in humans is controversial. Progress in understanding not only the pathophysiology of depression but also potential protective mechanisms is important both for daily clinical practice and for the development of new antidepressant therapies.
Objectives: To test and validate previous findings regarding the impact of CYP2C19 status on depressive symptoms and to examine whether it could influence hippocampus subregions and brain tissue microstructure.
Methods: A total of 4152 individuals from the Longitudinal cohort in the community-dwelling adult population - Colaus|PsyCoLaus in Lausanne, Switzerland were included. They have participated in at least one psychiatric evaluation. Brain anatomy patterns using a comprehensive set of psychometry, water diffusion- and relaxometry-based magnetic resonance imaging data were analysed in a subset of the cohort (BrainLaus, n=1187).
Results: In this population-based cohort study, better lifetime global assessment of functioning scores were observed in poor metabolizers when compared to other metabolizers, this result was mainly driven by female participants (ß=3.9, P=0.01). Examination of brain imaging data revealed that higher right hippocampal subiculum volume was related to poor metabolizer status (ß=0.03, P=0.006). In addition, associations were observed between metabolizer status and white matter microstructure in the left uncinate fasciculus (ß=-0.01, P=0.01) and the left cingulum bundle (ß=-0.01, P=0.01).
Conclusions: CYP2C19 status is associated with modifications in lifetime global functioning, and brain anatomy. Such differences in brain structures can contribute to explain the protective effect of CYP2C19 poor metabolizer status.

Disclosure: No significant relationships.
Keywords: CYP2C19; behavior; Global Assessment of Functioning; Hippocampus

O0148

Quantitative detection of methylated SOCS-1 in schizophrenia and bipolar disorder considering SOCS-1 -1478 CA/del polymorphism and clinical parameters

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