

Objectives: This study examines pandemic-related physical and mental health and (compensatory) behavioural changes, in patients with BD as compared to healthy control individuals.

Methods: Physical and mental health and self-reported changes in daily structure and behaviour due to pandemic were assessed using a self-constructed questionnaire and the brief symptom inventory (BSI) from outpatient clinics in Germany, Austria, and Denmark in individuals with BD and a healthy control group.

Results: The present study included 118 individuals with BD and 215 healthy controls. Individuals with BD reported statistically significant higher physical risk burden, increased weight gain, more physical comorbidities, and a decrease in physical activity and they further reported higher rate of COVID-19 testing, had more worries concerning health and experienced more anxiety but less social distancing.

Conclusions: The COVID-19 pandemic seems to have a greater impact on physical health in individuals with BD than in healthy controls. Individuals with BD appear to be having more difficulties compensating their behaviour due to the pandemic which could amplify the effect of risk factors associated with poorer physical health. This highlights the necessity for optimising and targeting the overall treatment of both mental and physical health in patients with BD during periods with far-reaching changes such as COVID-19 pandemic.

Disclosure: No significant relationships.

Keywords: physical health; bipolar disorder; Behavioural changes; Covid-19 pandemic

EPV0064

Lurasidone-induced mania: A case report

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Introduction: Lurasidone is an atypical antipsychotic agent with potential antidepressant effects through its antagonist activity at the 5-HT₇ receptor. Although treatment-emergent affective switch (TEAS) induced by second-generation antipsychotics are not frequent, several cases have been reported. To our knowledge, there is no evidence of lurasidone-induced TEAS.

Objectives: To describe a case of lurasidone-induced mania.

Methods: We describe a clinical case of a patient admitted to our psychiatric outpatient unit who developed a manic episode, presumably induced by the introduction of lurasidone. We also conduct a review of the literature on this subject.

Results: A 37-year-old man diagnosed with obsessive-compulsive disorder (OCD) and an alcohol use disorder was hospitalized due to OCD decompensation with depressive symptomatology and suicidal thoughts, and for alcohol detoxification process. Since he had a previous history of clomipramine-induced TEAS, he was started on lurasidone up to 111mg to avoid the use of antidepressants, showing a progressive improvement of depressive symptoms. Thus, the patient was discharged when alcohol detoxification process was completed. Eight days after discharge, the patient began to show manic symptoms, so he had to be readmitted. Lurasidone was discontinued and valproic acid up to 1000mg/day as mood stabilizer was added, presenting a positive remission of manic symptoms.

Conclusions: According to our experience, lurasidone may have induced an affective switch in this patient. Based on our findings, patients and psychiatrists should monitor possible lurasidone-induced mood switching. However, further research is needed in order to back-up this one case report findings.

Disclosure: No significant relationships.

Keywords: mania; switch; lurasidone

EPV0065

Direct and indirect predictors of medication adherence by adults with bipolar disorder

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Introduction: Medication adherence by persons with bipolar disorder (BD) is inconsistent. This is disconcerting, as BD is treatment responsive, side-effects are few, and the impact of both hypo/manic and depressive mood episodes can be considerable (e.g., self-harm).

Objectives: For this study, we computed a path model to identify both direct and indirect predictors of medication adherence. This included both clinical and psychosocial independent variables (e.g., BD symptoms, psychological well-being, alcohol misuse).

Methods: From the BADAS (Bipolar Affective Disorder and older Adults) Study, we identified a global sample of adults with the BD. Participants were recruited using microtargeted, Facebook advertising. This sample included persons living in Canada, U.S., U.K., Ireland, Australia and New Zealand (M = 55.35 years, SD = 9.65).

Results: Direct predictors included perceived cognitive failures and alcohol misuse. Of note, medication adherence is inversely associated with number of prescribed antipsychotic medications. Neither symptoms of depression nor hypo/mania emerged as direct predictors of medication adherence. Similarly, psychological well-being appears indirectly associated with adherence (via BD symptoms).

Conclusions: Despite the wide age range of participants (22 – 73 years), age did not emerge as a predictor of adherence. Nor do cognitive failures appear significantly associated with age suggesting that both young and older adults with BD perceived cognitive loss.

Disclosure: No significant relationships.

Keywords: bipolar disorder; medication adherence; alcohol misuse; cognitive failures

EPV0070

Long-acting new generation antipsychotics in the maintenance treatment of bipolar disorders

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Introduction: Maintaining remission, preventing from future episodes, better treatment adherence and improving the quality of life are main aims of long-term treatment in bipolar disorders (BD). In recent years, new generation long-acting injectable (LAI) antipsychotics have been frequently used in maintenance treatment for bipolar disorders.

Objectives: We aimed to review socio-demographic and clinical characteristics of bipolar patients taking LAI treatment for maintenance treatment.

Methods: Clinical records of 44 bipolar patients who are on LAI treatment and followed in Mazhar Osman Mood Clinic (MOMC) of Selcuk University Medical Faculty were evaluated.

Results: Nearly half of the patients were male (n:24, 54%). 43,2% of the patients were married. The mean age was 36.6 ± 11.9 years and the mean duration of education was 11.5 ± 3.9 years. All of the patients were diagnosed with bipolar 1 disorder. Most of the patients (65.9%) was on aripiprazole LAI while remaining was receiving paliperidone LAI for maintenance treatment. Ten of the patients discontinued the treatment due to the side effects and extrapyramidal side effects was the most common side effect. Relapse was observed in 25% of the patients and there was no difference between aripiprazole and paliperidone in terms of relapse rate.

Conclusions: LAI new generation antipsychotics are taking place in long-term treatment of bipolar disorder via improving treatment adherence. Side effect profile of aripiprazole and paliperidone are different. However, we could not find any difference between two drugs in terms of side effects and relapse rates. Small sample size and shorter duration of follow-up should be considered as limitations.

Disclosure: No significant relationships.

Keywords: Long-acting injectable antipsychotics; maintenance; bipolar disorders; Relapse

EPV0073

Lithium: more than a mood stabilizer

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Introduction: Bipolar disorder (BD) is characterized by episodic changes in affect, motivation, cognition and behavior. This severe mental disorder has a prevalence of at least 1% and a high heritability of 60%-80%. The pathophysiology is still poorly understood but evidence indicate that the disorder relates to disturbances in front-limbic networks relevant for emotion processing and regulation. New techniques have been used to study BD and showed aberrant white matter (WM) microstructure in the corpus callosum and from-limbic pathways. However, lithium, a mood stabilizer, it looks like has cellular and neuromodulatory effects.

Objectives: The authors elaborate a narrative literature review to identify the existing clinical evidence of lithium's effect on the WM from BD patients.

Methods: Pubmed databased searched using the terms "bipolar disorder", "white matter" and "lithium".

Results: Lithium is a bipolar medication that confers treatment and long-term prophylaxis and been reported as having neuroprotective effects.

Studies that used new techniques such diffusion tensor imaging measures to assess white matter integrity reported a positive effect of lithium on the integrity of WM of BD patients and suggest that response to lithium treatment in BD patients is associated with normalization of WM microstructure in regions associated with emotion processing.

Conclusions: Lithium appears to positively influence the evolution of the white matter abnormalities described in BD patients however further investigation is required to strongly reinforce this potential and safety.

Disclosure: No significant relationships.

Keywords: bipolar disorder; Neuromodulatory; Lithium; White matter

EPV0075

Clinical features of depression in women and men with bipolar affective disorder

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Introduction: Knowledge of the main markers of bipolarity, clinical features and the course of depression within BPAD in men and women will contribute to the correct diagnosis, prognostic assessment of the disease course and administration of an adequate therapy.

Objectives: The aim of the investigation was to study the clinical features of depression in men and women with BPAD in order to identify markers of bipolarity, facilitate a diagnostic search and determine therapeutic tactics.

Methods: The study was conducted from 2018 to 2020 in outpatient and inpatient conditions of the S. S. Korsakov Psychiatric Clinic of Sechenov University. 100 patients (50 women and 50 men) with a diagnosis of F31.3-F31.5 according to ICD-10 were examined by the clinical method.

Results: In the structure of the depressive phase in men, the following were more common: pronounced seasonality (with deterioration in autumn-winter) and daily fluctuations in the state (with improvement in the evening), anesthesia of the senses, depersonalization-derealization syndrome, decreased libido, difficulty falling asleep and increased appetite and / or body weight, comorbid depression, panic attacks and alcohol and surfactant abuse. Depression within the BPAD in women was characterized by a more frequent presence of apathy, tearfulness, self-harm, dysmorphic phobic inclusions, decreased appetite.

Conclusions: The revealed features of psychopathological symptoms and correlations between some characteristics and factors, taking into account gender differences, can be used as markers of bipolarity, which will allow for an earlier and more accurate diagnosis of BPAD and adequate therapy.

Disclosure: No significant relationships.

Keywords: Depression; Gender differences; Bipolar Affective Disorder