

expression in 11 cases. A metabolic disorder was found in 15 patients, such as hyperkalaemia (7 cases) and hyperglycaemia (8 cases). Etiological treatment was instituted with recourse to sedative treatment in 18 patients due to agitation. The evolution was marked by a total regression of confusion in 11 cases, lacunar amnesia in 7 cases, prolonged mental confusion in 6 cases and death in 3 patients.

Conclusions: Elderly subjects are at risk due to the vulnerability of brain structures to pathologies and treatments associated with this period of life. Early treatment can improve the prognosis.

Disclosure: No significant relationships.

Keywords: neurology; mental confusion

EPV1672

Boredom, loneliness and modern type depression in a cohort of Italian university students

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Introduction: COVID-19-related physical isolation, fear and anxiety determined de novo mental illnesses, by potentially facilitating the emergence of Hikikomori traits (i.e., a severe social withdrawal condition).

Objectives: The present study aims at screening a cohort of university students for the Hikikomori traits and assessing a set of psychopathological determinants associated with Hikikomori, particularly boredom and loneliness dimensions.

Methods: A cross-sectional web-based survey was carried out by administering Hikikomori Questionnaire (HQ-11), Italian Loneliness Scale (ILS), Multidimensional State Boredom Scale (MSBS), Depression Anxiety Stress Scale (DASS-21) and Toronto Alexithymia Scale (TAS-20).

Results: 1,148 respondents (767 women and 374 men, mean age: 23.2±SD=2.8 years old) were recruited. 70.7% declared to have experienced psychological distress. HQ-11 average total score was 18.4±SD=7.5 with statistically significant higher values in the males (p=0.017) and amongst students studying Informatics, Mathematics/Physics/Chemistry, Science of Communication and Engineering. The HQ-11 positively correlated with ILS (r=0.609), MSBS (r=0.415), TAS-20 (r=0.482) and DASS-21 (r=0.434).

Conclusions: This study represents the first screening of the Hikikomori phenomenon in Italian university students. Hikikomori traits appear to be particularly represented in the Italian youth population and should be carefully investigated in future studies.

Disclosure: No significant relationships.

Keywords: Modern Type Depression; Hikikomori

EPV1673

Prevalence of cognitive impairment and its association with clinical variables among Patients with Mood Disorders

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Introduction: Mood disorders are common psychiatric illnesses with major disability and mortality and it is estimated that 8% to 20% of the population experience a depressive episode at some point in their lives.

Objectives: To find out the prevalence of cognitive impairment among patients with Mood Disorders i.e, Major Depressive Disorder (MDD) and Bipolar Mood Disorder (BMD), etc. and to find out the status of cognitive impairment with clinical variables of Mood Disorders.

Methods: This was a descriptive cross-sectional study conducted among the patients attending both the inpatient and outpatient departments of the National Institute of Mental Health, Dhaka. The duration of the study was fourteen months starting from July 2011 to September 2012. A total of one hundred and thirty-three (n=133) patients who fulfilled the inclusion-exclusion criteria were selected.

Results: The mean age of onset of mood disorder was 30.1±10.7years.60.2% were male and 39.8% were female respondents. Cognitive impairment was found among 43.6% of the respondents. A substantial proportion of the study population was found to have cognitive impairment. In this study, the cognitive status of the respondents was not associated with the duration of illness (p>0.5).

Conclusions: So assessment of cognitive status should be an essential part of the management of this group of people.

Disclosure: No significant relationships.

Keywords: Mood disorders; bipolar disorders; COGNITIVE; depressive disorders

EPV1675

Anti-NMDA receptor encephalitis and psychosis: case report and literature review

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Introduction: Anti-NMDA receptor encephalitis is a disease occurring when antibodies produced by the body's own immune system attack NMDA receptors in the brain. Their functions are critical for judgement, perception of reality, human interaction, the formation and retrieval of memory, and the control of autonomic functions. The objective of treatment is to reduce the levels of antibodies in the blood and spinal fluid. Treatments include corticosteroids, intravenous immunoglobulin and plasmapheresis in

addition to other immunomodulators, such as cyclophosphamide or rituximab.

Objectives: To present a case of a 64 year-old patient who came to the emergency service of our hospital with long-standing anxiety, irritability, recurrent amnesic failures, visual hallucinations and recent-onset episodes of aggressiveness with his family. He required admission to the psychiatry department and was finally diagnosed with autoimmune anti-NMDA encephalitis by detecting antibodies in blood and CSF.

Methods: Clinical case presentation and literature review of cases, focusing on psychotic symptoms.

Results: A 65-year-old patient who was being studied by neurology and psychiatry departments for cognitive impairment and psychotic symptoms was admitted to Neurology after a positive lumbar puncture result for NMDA antibodies. During admission, the patient continued with a significant behavioral alteration that gradually remitted with the use of Quetiapine, corticosteroids and rituximab.

Conclusions: NMDA-encephalitis has a highly variable clinical presentation, which can lead to confusion with infectious etiology or psychiatric disorders, making the diagnosis difficult, which is only possible by detecting anti-NMDA antibodies in CSF. Recognition of the disease and coordination between services is essential for early diagnosis and treatment.

Disclosure: No significant relationships.

Keywords: Treatment; Encephalitis; Psychosis; Anti-NMDA

EPV1676

Efficacy of tPBM on ADHD symptoms and Executive Function Deficits in Adults with high-functioning Autism Spectrum Disorder

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Introduction: Executive function (EF) deficits are often associated with Autism Spectrum Disorder (ASD), even in the absence of Attention Deficit Hyperactivity Disorder (ADHD) diagnosis. To date, no approved medication treatments exist for EF deficits associated with ASD.

Objectives: To assess the efficacy of transcranial photobiomodulation (tPBM) on EF in adults with ASD.

Methods: Adults (18-59) with high-functioning (HF)-ASD received twice a week tPBM for 8 weeks in an open-label single group design. ASD and EF deficits were assessed by clinician-rated Clinical Global Impression Scale and patient-rated scales of Behavior Rating Inventory of Executive Function-Adult (BRIEF-A).

Results: Eleven participants were enrolled. Ten participants completed the study. Nine participants who completed the study had comorbid ADHD diagnosis. All 10 participants were included in efficacy analyses of EF deficits. Statistically significant improvements in executive function deficits were found in BRIEF-A total score and in subdomains of Inhibition, Emotional Control, Planning and Organization, Organization of Materials, Behavioral Regulation, Metacognitive Index and Global Executive Control.

All participants were found to have mild to moderate improvement in their ADHD symptom severity per clinician rated CGIs. Statistically significant improvements in ADHD symptoms were noted in self-rated scales. No adverse events required changes in tPBM protocol.

Conclusions: tPBM is a safe and feasible treatment approach that has the potential to treat core features of ASD. Further research is necessary and warranted.

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Keywords: Transcranial Photobiomodulation; Autism Spectrum Disorder; attention-deficit/hyperactivity disorder

EPV1678

Comparative analysis of impulsivity profiles in adult Attention Deficit Hyperactivity Disorder and Borderline Personality Disorder

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Introduction: High levels of impulsive behavior represent a core symptom of different psychiatric conditions, such as Attention Deficit Hyperactivity Disorder (ADHD), Borderline Personality Disorder (BPD), impulse control and conduct disorders, bulimia nervosa, substance use disorders, and other maladaptive behaviors. Impulsivity is a multidimensional construct, having at least three factors.

Objectives: Our aim was to describe the impulsivity profile in adult ADHD and BPD patients in comparison with a healthy control group, taking into consideration the different impulsivity factors.

Methods: aADHD (n=80) and BPD Patients (n=60) were recruited, based on the DSM-5 criteria. Control subjects (n=80) were screened using Derogatis Symptom Checklist (SCL-90). Comorbidities were assessed by structured clinical interviews. Participants were further investigated with online questionnaires including the Barratt Impulsiveness Scale (BIS-11), Difficulties in Emotion Regulation Scale (DERS), and neuropsychological tests, like Rogers' decision-making test.

Results: Based on the BIS-11 and DERS results, significantly higher levels of impulsivity (motor, attentional, non-planning) and difficulties in emotion regulation were present both in the aADHD and BPD groups, compared to the control group. Impulsivity factors were more characteristic to aADHD, emotion dysregulation was more specific to BPD. In the Rogers test, aADHD group was significantly slower in decision-making, while in BPD decision quality and risk-taking were affected.

Conclusions: Impulsivity profiles of the two disorders are different, which leads to the assumption of potentially altered pathway of developing impulsive behavior. As a neuropsychiatric condition,