

EPV0105

Resting-state Fronto-limbic Connectivity in Unipolar Depressive Patients as a Predictor for Sporadic Conversion to (Hypo)mania

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Introduction: Patients with a bipolar disorder (BD) may experience one or several episodes of major depression before transitioning into a manic phase. Given that treatment with common antidepressants may exacerbate symptoms of mania in patients with BD, initial diagnosis of major depressive disorder (MDD) is a significant issue affecting BD patients. Currently, a family history of BD is used as an early identifier for BD, but as genetic factors associated with BD confer susceptibility to a wide range of psychiatric illnesses, this approach lacks specificity. Thus, there is a pressing need for a biomarker which specifically predicts development of bipolar symptoms in patients with MDD, rather than a trait vulnerability to psychiatric disorder

Objectives: The aim of this study is to assess alterations in fronto-limbic function that exist prior to the manifestation of the first manic episode in BD patients without familial predisposition for BD.

Methods: To identify a biomarker for conversion to BD we performed a study in a naturalistic sample of MDD patients without a familial risk for BD, which were followed for 9 years. We used a seed-based functional connectivity analysis to assess differences in resting-state fronto-limbic connectivity between MDD patients who converted to BD during the follow-up period (n = 11), and non-converting MDD patients (n = 56).

Results: Clusters of significantly reduced functional connectivity were found in the fronto-limbic network of prospective converters relative to non-converters.

Conclusions: Findings suggest that alterations of fronto-limbic functional connectivity during episodes of depression predate and associate with conversion to BD later in life, in the absence of familial risk. These fronto-limbic functional connectivity disturbances may be of interest for diagnosing early-stage BD, and may offer insight in the mechanisms that drive conversion in the absence of familial predisposition. Findings from this study need to be verified through large-scale longitudinal imaging studies in naturalistic cohorts of MDD patients.

Disclosure of Interest: None Declared

EPV0106

Sociodemographic characteristics of patients diagnosed with bipolar disorder manic episode hospitalized in a psychiatry clinic

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Introduction: Bipolar disorder is a chronic mental illness that progresses with recurrent episodes and can cause serious loss of functionality. Sociodemographic characteristics have importance on the course of the disease.

Objectives: In this study, sociodemographic data such as age, gender, educational status, job, and family history of patients with bipolar disorder manic episode who were followed up and treated in the psychiatry ward of our hospital were recorded.

Methods: Our study included 50 patients diagnosed with bipolar disorder manic episode according to DSM-5 in the psychiatry service of Atatürk University Hospital and 50 healthy volunteers who had not applied to psychiatry before. A 16-item sociodemographic chart in which age, gender, marital status, lifestyle, number of marriages, number of children, years of education, job, monthly income, maternal and paternal survival status, family history of psychiatric illness, family history of bipolar disorder, smoking, alcohol and substance use were questioned. The data form was applied to the patients and healthy volunteers.

Results: After the statistical analysis between the groups, a significant difference was found in terms of lifestyle (p < 0.001), job status (p = 0.01), family history (p < 0.01) and substance use history (p = 0.04).

Conclusions: The rate of psychiatric illness in the families of individuals diagnosed with bipolar disorder increases significantly compared to the normal population, and the data of our study are in line with the literature in this respect. It is known that conditions such as lower employment and interruption of working life are common in patients with bipolar disorder due to diseases such as loss of functionality and pharmacotherapy side effects. In our study, similar to the literature, the employment status was found to be significantly lower in the BD group compared to the healthy controls. In our study, no significant difference was found between the groups in terms of smoking and alcohol use, while other substance use was found to be significantly higher in the bipolar disorder group. Since factors such as sociocultural structure, education, geographical conditions, religious belief may affect smoking, alcohol and substance use; multicenter studies with larger samples are needed in order to more clearly reveal the rates associated with bipolar disorder and other psychiatric conditions.

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EPV0107

Lithium intoxication due to furosemide interaction – a case report

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Introduction: Lithium has been used for the management of psychiatric illnesses over the years and it continues to be the first-line mood stabilizer used in treatment and prevention of bipolar disorder. Due to its narrow therapeutic index, other prescribed medications can increase lithium levels and potentiate its toxic effects. Among the most described drugs, non-steroid anti-inflammatory drugs and diuretics (mainly thiazides and loop diuretics) are the most commonly implicated. Risk factors for