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despite both groups having a similar frequency of plasma lithium level monitoring, occurring approximately every 5.5 months (SD=2.6) and 7.8 months (SD=4.8), respectively, in 28.5% of those who suffered from lithium intoxication did not undergo any monitoring for periods exceeding 18 months (p < 0.05).

Conclusions: Our research highlights the significance of delivering thorough clinical care and continuous monitoring to patients receiving lithium treatment for bipolar disorder. Ensuring effectiveness therapeutic adherence and maintaining strict monitoring of lithium levels are critical factors that significantly enhance treatment safety. Appropriate management has the potential to improve the quality and safety of care for people with bipolar disorder who are dependent on lithium therapy.

**Disclosure of Interest:** None Declared

### **Child and Adolescent Psychiatry**

#### **EPP0486**

# Pharmacogenetic intervention in the Child and Adolescent Autism Day Therapeutic Unit

A. Alvarez<sup>1</sup>\*, N. Santamaria<sup>2</sup>, V. Bote<sup>1</sup>, R. Medina<sup>1</sup>, B. Sanchez<sup>2</sup>, I. Mendez<sup>2</sup>, J. A. Monreal<sup>2</sup>, M. J. Arranz<sup>3</sup> and A. Hervas<sup>2</sup>

<sup>1</sup>University Hospital Mutua Terrassa, Terrassa, Spain; <sup>2</sup>Mental Health, University Hospital Mutua Terrassa and <sup>3</sup>Mutua Terrassa Foundation, Terrassa, Spain

\*Corresponding author. doi: 10.1192/j.eurpsy.2024.623

Introduction: The ASD Therapeutic Day Unit is a tertiary care unit that consists of 20 beds, designed to facilitate the evaluation and treatment of children and adolescents with ASD who present high psychiatric comorbidity with behavioral problems, communication/language problems, sensory, and/or in the management of their repetitive and restricted interests. In addition to diagnosis and genetic counseling and clinical care, we offer the possibility of performing an individualized pharmacogenetic study in order to offer appropriate pharmacological treatment to patients with ASD and comorbidities.

**Objectives:** The objective is to promote pharmacological tolerability, avoid unwanted side effects, as well as avoid the use of polypharmacy, in children with a tendency to poor drug metabolism. **Methods:** A review of the medical history of the patients included in the Blood Extraction Program of the ASD Day Therapeutic Unit is carried out during the year 2022. The existing medications at admission, the results of the pharmacogenetic analyzes carried out, and the pertinent changes in the pharmacological treatment of these children.

**Results:** 37 children were included in the program during 2022. The genes CYP1A2, CYP2C19, CYP2D6, CYP3A4 and 5-HTT were analyzed. The variant studied is described, as well as the observed genotype and the expected phenotype.

Of the 37 patients, 11 maintained the same pharmacological treatment as at the beginning of admission, 5 were not taking pharmacological treatment and 25 underwent a treatment modification. The most frequently modified treatment was risperidone with aripiprazole (n=10), secondly risperidone with guanfacine (n=5), and thirdly fluoxetine with aripiprazole (n=2).

Furthermore, the degree of pharmacological polytreatment was reduced. 18 patients switched to a single drug, instead of 14. 11 patients 2 drugs (instead of 14), 3 patients 3 drugs instead of 4 and 5 patients remained without drug treatment.

**Conclusions:** Patients with ASD have worse tolerability to pharmacological treatments than other patients with severe mental disorders.

The use of pharmacogenetics allows improving the cost/effectiveness of medical prescription, avoiding undesirable side effects or lack of effectiveness in the treatment of patients with ASD.

Promoting the implementation of pharmacogenetics in patients with ASD (among others) would improve the clinical situation of these patients more effectively and would improve the economic expenditure derived from erroneous prescription and/or excessive polypharmacy.

Disclosure of Interest: None Declared

### **EPP0487**

## The uncharted territory of female adult ADHD: a comprehensive review

B. A. Oroian\*, G. Costandache, E. Popescu, P. Nechita and A. Szalontay

Institute of Psychiatry "Socola" Iasi, Iasi, Romania \*Corresponding author. doi: 10.1192/j.eurpsy.2024.624

Introduction: Attention-Deficit/Hyperactivity Disorder (ADHD), once considered a predominantly childhood condition, has increasingly gained recognition as a prevalent and clinically significant concern among adult women. They often display a distinctive symptom profile characterized by high levels of inattention, emotional dysregulation, and difficulties in executive functioning. Diagnosis of female adult ADHD is frequently complicated by gender bias in traditional diagnostic criteria, which may fail to account for the unique ways in which women manifest the disorder.

**Objectives:** This comprehensive literature review aims to characterize the unique symptomatology of female adult ADHD, including variations in inattention, hyperactivity, and impulsivity, as well as the presence of emotional dysregulation. It also seeks to explore the diagnostic challenges stemming from gender bias in diagnostic criteria and the role of comorbidity in diagnostic complexity. Additionally, the review assesses the broad spectrum of functional impairments experienced by adult women with ADHD, spanning academic, occupational, interpersonal, and emotional domains.

**Methods:** This literature review comprises a systematic examination of published research articles, clinical studies, and relevant academic literature addressing female adult ADHD. A comprehensive search strategy involving electronic databases, including PubMed, PsycINFO, and Google Scholar, was employed to identify peer-reviewed articles published between 2000 and 2023. The selected studies underwent critical appraisal for quality and relevance to the review's objectives.

**Results:** The synthesis of existing literature reveals that female adult ADHD presents a distinctive clinical picture characterized by a higher prevalence of inattention, emotional dysregulation, and comorbid conditions such as mood and anxiety disorders. Diagnostic challenges arise from gender bias in diagnostic criteria and