

Correlations were found in Age with Butyrate ( $r=-0.248, p=0.043$ ) and weekly alcohol units with Propanoate ( $r=0.250, p=0.041$ ) plus trend to significance with Butyrate ( $r=0.232, p=0.059$ ). It also showed a trend towards statistical relation for CPZ-ED with Propanoate ( $r=-0.253, p=0.039$ ) and Total SCFA ( $r=-0.253, p=0.039$ ). We found no correlation in SCFA with MetS, CGI, PANSS-N, BMI, IPAQ, MEDAS and other toxic habits.

ANCOVA was performed to Acetate and Total SCFA using depression state as independent variable and Age and CPZ-ED as covariates. There was a trend towards statistical significance for Acetate ( $F=3.937, p=0.052, \eta^2=0.059$ ) whereas Total SCFA showed no difference ( $F=1.350, p=2.250, \eta^2=0.021$ ).

**Conclusions:** There seems to be lower levels of fecal Acetate in SZ patients with depressive symptoms, considering age and anti-psychotic intake. In our sample there was no relation between SFCA and clinical severity, lifestyle, comorbidities or antidepressant use.

**Disclosure of Interest:** None Declared

## EPP0343

### Unlocking insights from actigraphy: examining feature selection and activation detection approaches for enhanced data interpretation

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**Introduction:** Alterations in motor activity are an extremely important characteristic and one of the leading symptoms of major functional psychiatric disorders. These pattern disturbances can be observed in schizophrenia. Actigraphy is a non-invasive method that can be used to monitor these changes, and recent studies emphasize its significance in the early identification of disorders like schizophrenia.

**Objectives:** This study uniquely focuses on distinguishing latent liabilities for schizotypy from manifested schizophrenia using specific actigraphy features.

**Methods:** Actigraphy data were collected using specialized devices from the University of Szeged and Haukeland University Hospital datasets (Berle et al., 2010). At Haukeland University Hospital patients with chronic schizophrenia (N=23) (so-called: manifested group) were collected, separately, at the University of Szeged, healthy university students were recruited and screened for latent tendencies towards schizotypic pathological development. In the latter study, two main groups were formed based on their scores:

a positive schizotypy factor group (so-called: latent group) (N=22) and a control group (N=25), with actigraphy data.

Utilizing the pyActigraphy library (Hammad et al., 2021) and wavelet analysis, features such as activity mean, interdaily stability and sleep movement characteristics were derived. Feature selection employed machine learning algorithms, notably Logistic Regression, Random Forest, ANN, and AHFS aided by Shapley values and Click Forming Feature Selection for insight into the most influential features.

**Results:** The three models exhibited similar performance with a 60% accuracy threshold. In the latent group, sleep-related movements have a substantial impact, while in the manifested group, in addition to sleep characteristics, features like RA, IV, ADAT, M10, the mean activity level (all of which decreased), and the ratio of zero values also play a significant role. In the latent group, features related to the length of small amplitude movements were dominant, particularly the increased values, along with a decrease in the density of large movements.

**Conclusions:** Our study indicates that in the latent phase of schizophrenia, actigraphy features related to sleep are most significant, but as the disease progresses, both sleep and daytime activity patterns are crucial. Sleep disturbances may signal early susceptibility, with nighttime movements offering clearer insights. These variations might be influenced by medication effects in the manifested group, reflecting the broader challenges in schizophrenia research where the drug-free study of patients remains elusive. Further studies should explore these features in the Clinical High Risk and prodromal groups to refine our understanding of the development of the disorder.

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## EPP0724

### Manic episode with psychotic symptoms in a patient with Pseudologia Fantastica of years of evolution. A case report

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**Introduction:** Pseudologia Fantastica (PF) also called “mythomania” is a disorder centred on the tendency of the sufferer to distort reality through constant lies. These patients find it difficult to moderate their sense of self and their self-esteem. Therefore, they display significant grandiosity, which seems to defend them from intense psychological disturbance, pretending to counteract deep feelings of unworthiness, emptiness and alienation.

Notable characteristics include: normal or above average IQ, absence of formal thought disorder, poor sense of identity, poor sexual adjustment, low frustration tolerance, strong dependency needs and narcissism. The phenomenon of “imposture” (the person’s claim of achievement or having connections to famous or influential people) is frequent. The patient’s history often shows that one or both parents were experienced as rejecting figures. They