and task-related power spectra, functional connectivity, microstates and epileptic abnormalities. At pre-treatment EEG, the most relevant predictors of a poor response were a change in theta power compared to healthy control, a high alpha power and connectivity, a diminished beta power in resting-state. Considering EEG during treatment, an increased theta power, a reduced beta-band activity, an increased alpha activity, a decreased coherence in theta, alpha and beta-band were related to a favorable outcome.
**Conclusions:** EEG is promising as a method to create a predictive biomarker for response to APs; further investigations are warranted to harmonize and generalize the contradictory results of reviewed studies.

**Disclosure of Interest:** None Declared

## O0089

### Multidimensional assessment of personality disorders using different theoretical models: a comparison of the Young Schema Questionnaire, the SCID-5-AMPD structured diagnostic interview, and the PDS-ICD-11 self-report questionnaire

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**Introduction:** There has been a recent shift in the conceptualisation of personality disorders in diagnostic systems such as DSM-5 or ICD-11, from a categorical approach towards a dimensional approach reflecting severity in general or severity of dysfunction and related pathological traits. In addition, several psychotherapeutic approaches work with their own model of personality pathology, which similarly capture symptoms of personality disorders and their underlying processes in a more subtle way from multiple aspects, and along different constructs.
**Objectives:** The aim of our study was to investigate similarities and differences between conceptualisations of personality disorder and instruments used for evaluation based on the BNO-11 Personality Disorders Severity Questionnaire (PDS-ICD-11), Module I. of the Structured Diagnostic Interview for the DSM-5 Alternative Personality Model (SCID-5-AMPD) measuring level of personality function, and the Young Schema Questionnaire assessing early maladaptive schemas.
**Methods:** Hospitalized borderline patients were assessed using the Young Schema Questionnaire, the PDS-ICD-11, and Module I. of the SCID-5-AMPD assessing personality function level. Data are analysed using correlation and linear regression models.
**Results:** Only part of the results are shown. The PDS-ICD-11 Severity Index and Self-function Index showed significant ($p<0.05$) and strong correlations with the Abandonment (r=0.98, r=0.94), Vulnerability to harm and illness (r=0. 92, r=0.98), Insufficient Self-Control (r=0.91, r=0.88) and Negativism/Pessimism (r=0.95, r=0.90) schemas. The mean score and all domains of the SCID-5-AMPD Module I (level of personality function) showed significant strong correlations with the Vulnerability to harm and illness schema (AMPD-Average r=0.87; AMPD-Identity r=0.86, AMPD-Objectivity r=0.81, AMPD-Empathy r=0. 77, AMPD-Intimacy r=0.80, $p<0.05$); moreover, a strong significant correlation was found between the Abandonment schema and AMPD-Average (r=0.81, $p<0.05$), AMPD-Identity (r=0.98, $p<0.05$), and AMPD-Intimacy domains (r=0.77, $p<0.05$).
**Conclusions:** The main indicators of measures that operationalise a dimensional approach to personality disorders show distinct patterns of strong overlap with some of the maladaptive schemas but cover only a part of the schema domains. For a careful diagnosis and psychotherapeutic plan, the combined use of these measures can provide in-depth and multifaceted information.

**Disclosure of Interest:** None Declared

## Prevention of Mental Disorders

## EPV0759

### The Role of Alcohol Use Disorders in the Development and Progression of Dementia

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**Introduction:** In recent years, there has been an increase in interest and research into the link between alcohol use disorders (AUD) and dementia. Alcohol use disorders, which are characterised by excessive and problematic alcohol consumption, have been associated to a variety of detrimental health effects, including liver disease, cardiovascular difficulties, and cognitive impairments.
**Objectives:** To explore the link between alcohol use disorders and dementia onset and progression, explaining probable causes and emphasising preventive approaches.
**Methods:** The present study involved a thorough examination of relevant research papers, with a specific emphasis on longitudinal cohort studies, neuropathological observations, and biochemical interactions pertaining to the effects of alcohol on the brain. In addition to the aforementioned criteria, the review also took into account other complicating factors, including choices regarding lifestyle, genetic predisposition, and coexisting medical conditions.
**Results:** The results indicate a strong association between prolonged and excessive alcohol consumption and a heightened susceptibility to the early onset of dementia. The mechanisms underlying alcohol-related neurological damage encompass direct neurotoxic effects of