

## EPP0529

### Lifetime number of affective episodes and functioning in a cohort of patients with bipolar disorder: A cross-sectional study

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**Introduction:** Cognitive impairment has been commonly found in patients with bipolar disorder (BD).<sup>(1)</sup> Recent evidence supports the view that global and cognitive functioning decrease as a function of number of prior mood episodes, but the relationship is still not clear.<sup>(2)</sup>

**Objectives:** We conducted a cross-sectional study to explore the associations between the lifetime number of affective episodes and functioning, in particular, cognitive functioning in a cohort of patients with BD.

**Methods:** Adult patients with BD were recruited if euthymic for at least 3 months. Socio-demographic and clinical variables were recollected at the baseline evaluation. Functioning was evaluated at baseline with the functioning assessment short test (FAST). The strength of the association between the lifetime number of affective episodes and FAST subscores was explored with Spearman's correlation test. Linear regression was computed using cognitive functioning as the dependent variable and a set of clinically relevant variables including the lifetime number of affective episodes as independent variables after controlling for illness duration.

**Results:** 261 BD patients were recruited. Patients with a higher number of lifetime affective episodes showed a significant positive correlation with higher FAST global score ( $r=0.334$ ,  $p<0.001$ ) and FAST cognitive functioning subscore ( $r=0.331$ ,  $p<0.001$ ). At the linear regression, a higher number of affective episodes was associated to worse cognitive functioning ( $b=0.037$ , 95%CI [0.011-0.064],  $p=0.005$ ).

**Conclusions:** Poor cognitive functioning in BD could be the result of multiple affective relapses. A timely diagnosis with subsequent effective prophylactic treatment may prevent poor functional outcomes in real-world patients with BD.

**Disclosure of Interest:** None Declared

## EPP0530

### Culturally adapted psychoeducation for bipolar disorder in a low-resource setting: protocol for a multicentre randomized controlled trial

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**Introduction:** Bipolar disorder (BD) is a source of marked disability, morbidity, and premature death. There is a paucity of research on personalized psychosocial interventions for BD, especially in lowresource settings. A previously published pilot randomized controlled trial (RCT) of a Culturally adapted PsychoEducation (CaPE) intervention for BD in Pakistan reported higher patient satisfaction, enhanced medication adherence, knowledge and attitudes towards BD, and improvement in mood symptom scores and health-related quality of life measures compared to treatment-as-usual (TAU).

**Objectives:** This protocol describes a larger multicentre RCT to confirm the clinical and cost-effectiveness of CaPE in Pakistan.

**Methods:** A multicentre individual, parallel arm, RCT of CaPE in 300Pakistani adults with BD. Participants over the age of 18, with adiagnosis of bipolar I and II and who are currently euthymic, will berecruited from seven sites including Karachi, Lahore, Multan, Rawalpindi,Peshawar, Hyderabad and Quetta. Time to recurrence will be the primaryoutcome assessed using Longitudinal Interval Follow-up Evaluation(LIFE). Secondary measures will include mood symptomatology, qualityof life and functioning, adherence to psychotropic medications, andknowledge and attitudes towards BD.

**Results:** Full ethics approval has been received from National Bioethics Committee (NBC) of Pakistan and Centre for Addiction and Mental Health (CAMH), Toronto, Canada. The study has completed sixty-five screening across the seven centres, of which forty-eight participants have been randomised.

**Conclusions:** A successful trial will lead to rapid implementation of CaPE in clinical practice, not only in Pakistan, but also in other low-resource settings including those in high-income countries, to improve clinical outcomes, social and occupational functioning, and quality of life in South Asian and other minority patients with BD.

**Disclosure of Interest:** None Declared

## EPP0531

### Association between oxidative stress and altered cholesterol metabolism in patients with Bipolar Disorder

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