S120 e-Poster Presentation

Objectives: Our objective was to analyze distinct homogeneous subgroups of individuals characterized by specific psychopathy profiles and examine their relationship with risk-taking behavior. **Methods:** Our sample consisted of 371 participants (26.4% men. aged 18 to 59 years), who completed the 34-item Self-Report Psychopathy Scale-III to assess psychopathy and Risk-taking behaviors were assessed using the Domain-Specific Risk-Taking Scale (DOSPERT-30).

Results: Through cluster analysis, we identified four distinct groups: Low psychopathy, Low criminal tendencies, High erratic lifestyle, and High psychopathy group. The primary findings revealed that the High psychopathy group, characterized by elevated scores in all sub-dimensions, exhibited higher levels of Risk-Taking Behaviors and a lower Perception of Risk compared to the other groups. Furthermore, the Low criminal tendencies group, marked by high scores in all dimensions and low scores in criminal tendencies, demonstrated greater risk-taking behavior compared to the Low psychopathy and High erratic lifestyle groups.

Conclusions: These results stimulate the debate about whether it is appropriate to incorporate the dimension of criminal tendencies within the concept of psychopathy. Certain clinical implications emerge from this study that are deserving of a comprehensive and thoughtful discussion.

Disclosure of Interest: None Declared

Psychopathology

EPP0051

Instagram addiction, life satisfaction and self esteem in young adults

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Introduction: Addiction to Instagram can have severe consequences at a psychological, physiological and social level. On the other hand, social networks can be useful tools for an individual's daily life. Studies show that the problematic use of some social networks, namely Instagram, can have an impact on users' selfesteem. This construct is considered a predictor of life satisfaction, which is why in the literature these two variables appear positively related.

Objectives: To explore the relationship between addiction to Instagram, life satisfaction and self-esteem in young adult university students and to carry out a comparison between groups with and without probable addiction to Instagram.

Methods: The sample was composed by 241 Portuguese university students with a mean age of 22.03, (SD = 2.29, range 18-29), and who have an Instagram account. Subjects fulfilled a sociodemographic questionnaire, and the Portuguese version of the Bergen Instagram Addiction Scale, the Life Satisfaction Scale and the Rosenberg Self-Esteem Scale.

Results: The average score on the Bergen Instagram Addiction Scale was of 13.37 ($\overline{SD} = 4.41$), with 29.5% of the sample spending one to two hours a day (n = 71) on the social network and 29.1% showing a probable Instagram addiction (n = 70). Mean scores of 27.17 (SD = 5.34) were found on the Rosenberg Self-Esteem Scale and 16.31 (SD = 3.97) on the Satisfaction with Life Scale. A strong relationship was found between life satisfaction and self-esteem, with males tending to have an higher self-esteem comparing to females. A low negative correlation was found between self-esteem and the total score on the Bergen Instagram Addiction Scale, which was not maintained when analyzing groups with and without a probable Instagram addiction.

Conclusions: This study demonstrates the probable presence of instagram addiction and the potential role of low self-esteem. It also emphasizes the strong relationship between life satisfaction and self-esteem. Instagram updates, as well as habits developed during the pandemic period, may have worsened the instagram use. The study shows how paradoxical the impacts of using this social network can be. Furthermore, the present study raises awareness to new national investigations that explore the use of Instagram and how they are related to the impacts on users' lives.

Disclosure of Interest: None Declared

EPP0052

Anxious-depressive symptoms after a first episode of schizophrenia: Response to treatment and psychopathological considerations from a 2-year follow-up study in Italy

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Introduction: Depression is common in schizophrenia and is correlated with suicide risk and poor long-term outcomes. However, the presence of depressive symptoms is often underestimated in both research and treatment, particularly at the illness onset.

Objectives: The goals of this study were: (a) to longitudinally observe anxious-depressive symptom levels in patients with First Episode Schizophrenia (FES) during a 24 months of follow-up period, and (b) to examine their associations with other psychopathology and the intervention patients received in an "Early Intervention in Psychosis" (EIP) program during the follow-up

Methods: The Global Assessment of Functioning (GAF) and the Positive And Negative Syndrome Scale (PANSS) were completed by 159 FES patients both at baseline and across the follow-up. Data were analyzed by linear regression analysis and Spearman's coefficients.

Results: Anxious-depressive symptoms had significant longitudinal associations with GAF deterioration and PANSS "Positive Symptoms", "Negative Symptoms" and "Disorganization" subscores. During the follow-up period, FES participants significantly improved the level of anxious-depressive symptoms. This was significantly associated with the number of case management and individual psychotherapy meetings the patient engaged in, as well as with lower antipsychotic doses prescribed during the follow-up period.

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Conclusions: In conclusion, anxious-depressive symptoms are prominent in FES and at the initial entry into EIP programs. Anxious-depressive symptom severity tends to diminish overtime, especially with the provision of specialized EIP treatments. However, since we did not have a control population studied in parallel, we cannot say whether these results are specific to the protocols of EIP programs or just to the intensity of engagement in care.

Disclosure of Interest: None Declared

EPP0053

Psychological immunity: A new mental health test for psychiatric samples

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Introduction: The Mental Health Test serves as the operationalized, comprehensive measurement of Maintainable Positive Mental Theory which defines mental health (for either the non-clinical or psychiatric population) as a high level of global well-being, psychological, social and spiritual functioning, resilience, effective creative and executive functioning, savoring capacities, coping and enjoyment, regardless of the presence or absence of symptoms of psychopathology.

Objectives: To assist psychiatrists and clinical psychologists to assess their patients' psychological immune competence—based capacities and resources, depending on the mental health disorder diagnosis and the severity of the symptoms, the present study examined the psychometric properties of the Mental Health Test in a psychiatric sample.

Methods: The research was carried out in four Hungarian health-care facilities using a cross-sectional design. A total of 331 patients (140 male, 188 female, and 3 who preferred not to disclose their gender) completed the Mental Health Test, six well-being and mental health measures, and the Symptom Checklist-90. Clinical psychologists reported the mental disorder status of each participant.

Results: Confirmatory factor analysis showed a good fit of the fivefactor model to the data for the clinical version of the Mental Health Test (CFI = 0.972, RMSEA = 0.034). High internal consistency coefficients (α: 0.70–0.84; ω: 0.71–0.85) and excellent external and content validity were reported. The Mental Health Test was not sensitive to sociodemographic indicators but was sensitive to correlates of well-being and symptoms of mental disorders in a psychiatric sample. Regression analyses demonstrated that unipolar depression and number of mental disorders were related to a lower overall Mental Health Test score. Personality disorders, unipolar depression, and the greater severity and higher number of mental disorders were associated with a lower global well-being score. Unipolar depression was related to lower savouring capacity. Selfregulation showed a correlation with the self-reported number of mental disorders only. Anxiety and somatization disorders, unipolar depression, and a higher number of self-reported mental disorders were related to a lower psychological resilience score. The regression model for the creative and executive efficiency subscale did not fit our data. The interaction of all combinations of psychotherapy and pharmacotherapy was significantly related to the overall Mental Health Test score and to the subscales. These results can later serve as a basis for designing intervention studies. Conclusions: Our preliminary findings suggest that the Mental Health Test is a suitable measure for assessing mental health capacities and resources in psychiatric samples.

Disclosure of Interest: None Declared

EPP0054

Premenstrual dysphoric disorder—an undervalued diagnosis? Preliminary results of a prospective study on Hungarian women

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Introduction: The premenstrual dysphoric disorder (PMDD) is a new distinct diagnostic entity in the Fifth Edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5). However, the severe premenstrual (PM) symptoms associated with PMDD result in functional impairment, globally, it remains highly underdiagnosed, underscoring the need for enhanced clinical recognition.

Objectives: This ongoing study aims to assess the prevalence and symptom profile of PMDD in a sample of Hungarian women. It is part of a comprehensive research process aiming to validate a prospective PMDD diagnostic questionnaire (Daily Record of Severity of Problems, DRSP) in order to facilitate the diagnosis of the disorder.

Methods: The study was performed in three steps. Firstly, retrospective data were collected from 112 women. Probable PMDD was assessed using the DSM-5 Based Screening Tool, while anxiodepressive symptoms and well-being were evaluated using the Beck Depression Inventory, the state subscale of the State-Trait Anxiety Inventory, and the WHO Well-Being Scale. Subsequently, prospective data were obtained from 9 women who completed the