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doi: 10.1192/j.eurpsy.2021.1943

Introduction: Meta-analytic evidence suggests that migrants have higher risk for psychotic disorders. Likewise, growing evidence relate developmental trauma (emotional, sexual, physical abuse and neglect in childhood or adolescence) as a causal factor for psychotic symptoms. However, few studies examine developmental trauma in migrant populations.

Objectives: The aim of this study is to describe and compare developmental trauma exposure prevalence between immigrant and non-immigrant psychotic patients in Barcelona.

Methods: Patients who have presented, according DSM-V criteria, one or more non-affective psychotic episodes, were recruited in Acute and Chronic inpatients units at Hospital del Mar (Barcelona), leading to a total sample of 77 patients. Demographic characteristics of patients, clinical data and main pharmacological treatment were recorded through a questionnaire. Developmental trauma exposure was assessed by Childhood Trauma Questionnaire (CTQ). Comparative analysis was performed with IBM SPSS using Chi-Square Test and t-Student test.

Results: From a total of 77 patients, 43 were immigrants and 34 were non-immigrants. Exposure to traumatic events showed significant differences between immigrants and non-immigrant in Child emotional abuse (64,4% immigrants, 35,3% non-immigrant), Child physical abuse (51,2% immigrants, 14,7% non-immigrant), Child Sexual Abuse (41,9% immigrants, 11,8% non-immigrant) and physical neglect (62,8% immigrants, 26,5% non-immigrant). Emotional neglect exposure was no significant between both groups. Total mean CTQ score was 37,53 in immigrants group and 52,60 in non-immigrant group.

Conclusions: According to our results, there are important and significant differences in developmental trauma exposure between immigrant and non-immigrant psychotic patients. These results should be considered by clinicians in order to design assessment program for this population.

Disclosure: No significant relationships.

Keywords: transcultural psychiatry; trauma; psychosis; migration psychiatry

EPV0384

Migration: A risk factor for psychosis?

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doi: 10.1192/j.eurpsy.2021.1944

Introduction: Emigration is a complex process of social changing through which an individual moves from a certain cultural environment/context to another, aiming to achieve persistent or long-term residency, causing distress. There is sustainable evidence that incidence of all forms of psychosis is higher in migrants.

Objectives: This study aims to gather data of other research conducted in the field according to emigration as a risk factor for development of different psychosis.

Methods: Scientific articles searched in MEDLINE, regarding the incidence of mental disorders in different emigrant populations, for the period 1995 - 2015.

Results: The average relative risk of schizophrenia and of other psychosis occurrence among first generation emigrants was 2.7 (95% confidence interval [CI]=2.3-3.2). Statistical analysis performed among studies of first and second generation of emigrants, and among studies which don't make difference between generations, results in a relative risk of 2.9 (95% CI=2.5-3.4) of mental illness.

Conclusions: The data presented in this study emphasize the impact of migration on central symptoms of schizophrenia. Emigration process, cultural and social adaptation, play an important role on the individual mental health.

Disclosure: No significant relationships.

Keywords: Risk factors; psychosis; schizophrenia; Migration

EPV0388

Roles of trait resilience, flexibility, and volitional self-control in social adaptation: An fMRI study

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doi: 10.1192/j.eurpsy.2021.1945

Introduction: Resilience and cognitive flexibility are considered as pre-adaptive traits that help individuals to deal with environmental and social distress. Although they may alleviate emotional impulses and/or support volitional self-control (VSC), these cognitive mechanisms remain insufficiently explored.

Objectives: To better understand resilience and flexibility, we built a mechanistic framework to explain variations in socially adaptive responses under distressing situations (cooperation dilemma) using economic and social decision-making paradigms.

Methods: Twenty-four university students (7 females) were enrolled. We used ego-resiliency (ER) and Machiavellian (Mach) questionnaires to measure resilience and flexibility, and applied third-party punishment (TPP) and ultimatum game (UG), as well as moral dilemma (MD) tasks to derive VSC-associated brain activity using 3T-functional magnetic resonance imaging. Mediation analysis was used to investigate whether these pre-adaptive trait levels explain cooperative decision-making (invested sum in TPP and acceptance rate of unfair offers in UG), together with VSC-associated brain activity during MD. The regions of interest included the orbitofrontal cortex (OFC), dorsolateral prefrontal cortex (DLPFC), and temporoparietal junction (TPJ).

Results: Pre-adaptive traits were a statistically significant mediator for two different models. There was an indirect effect of 1) ER on the relationship between OFC activity strength and TPP scores, and 2) Mach on the relationship between DLPFC/TPJ and UG ($p < 0.05$).

Conclusions: Although recruitment is still ongoing, our results suggested that trait resilience and flexibility may help other-regarding and goal-directed motivation shifts. They may align self-interests with collective interests and support VSC, thereby adjusting peoples' behaviors within social contexts and cultivating social intelligence.

Disclosure: No significant relationships.

Keywords: flexibility; self control; resilience; fMRI

Neuroscience in psychiatry

EPV0390

New digital tools for assessing neuropsychological executive functioning in old and new addictions. an exploratory study

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doi: 10.1192/j.eurpsy.2021.1946

Introduction: Nowadays new tools suitable for exploring executive functioning (EF) of behavioral addicted individuals are needed.

Objectives: This study tests a novel digital assessment battery that can be easily and remotely adopted by neuropsychologists working in the field of addiction.

Methods: Twenty-three participants were divided into two groups, balanced for age and education: an experimental (EXP) group of 13 patients with gambling behavior, and a control (CNT) group of 10 healthy subjects. A neuropsychological battery including 5 neuropsychological tests (measuring long- and short-term verbal memory, working memory, cognitive flexibility, verbal and non-verbal fluency, attention), and a behavioral task (modified Go/NoGo task with addiction-related stimuli) was digitally administered. Anxiety, depression, and impulsivity levels were collected before the evaluation.

Results: Significantly higher scores were found for repetition errors in the short-term verbal memory test, in the EXP subjects compared to controls. Higher reaction times were found in the Go/No-Go task for the EXP compared to CNT, with significant differences for neutral and addiction-related (cocaine, THC) stimuli. Furthermore, EXP showed higher impulsivity scores.

Conclusions: Although the study was only exploratory, the significant results could support the validity of this new digital tool. Besides, we could conclude that memory impairment and attentional bias in inhibitory control tasks could cover a significant role in new and old addiction and that impulsivity could represent a critical factor in explaining the relationship between EF impairment and addiction. Lastly, this study contributes not only to the understanding of EF impairment in addictions but also in the delivery of remote suitable digital neuropsychological testing.

Disclosure: No significant relationships.

Keywords: Executive functions; neuropsychology; digital assessment; Addiction

EPV0391

Hemorrhagic strokes in a young adult patient

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doi: 10.1192/j.eurpsy.2021.1947

Introduction: Stroke is a growing public health problem in the developed world resulting in more hospitalization and mortality. In young adults stroke is the third most common cause of death world wide and the fourth leading cause of disease burden.

Objectives: The aim was to describe a case of recovery after two hemorrhagic strokes in a young adult patient.

Methods: It was presented a clinical case and review the current literature showing the pathway of recovery.

Results: A 38-years-old man presented two episodes of hemorrhagic strokes with a lack of 6 months. With history of hypertension, smoking habits and consume of cannabinoid. The first hemorrhagic stroke had sequels of right hemiparesis. It was diagnosed with frontal arteriovenous malformation. In the second episode was submited to frontoparietal craniotomy with total dissection of the arteriovenous malformation. After surgery he had convulsive crises that remited with valproic and levetiracetan. It did intensive rehabilitation and two months later he recovered totally. In this momente he is functional for daily lactivities, maintained the same treatment and cognitive stimulation.

Conclusions: It is necessary to accomplish for healthy habits in order to prevent strokes in young people. A better prognoses may be related to a urgent and prolonged intervention and rehabilitation.

Disclosure: No significant relationships.

Keywords: cardiovascular risk; neurorhabilitation; hemorrhagic stroke; young adult

EPV0392

Behavioral disturbances in porencephaly. Report of a case

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doi: 10.1192/j.eurpsy.2021.1948

Introduction: Porencephaly is a neurological condition that can develop before or after birth, characterized by cysts located in any place inside the brain parenchyma, which generally are covered by plain walls and encircled by an atrophic crust. It generates a very variable clinic appearance, with severe cases of high disability and slight cases with a light neurological involvement, which also can go unnoticed until adulthood. The prevalence is unknow and the inheritance is autosomal dominant Male patient of 45 years diagnosed with porencephaly with cerebral palsy that affects left half and cognitive disability. His father reports an emerging defiant behavior, mutism and decrease of appetite from a week ago. No triggering stress factors are reported.

Objectives: Show the importance of include in the differential diagnose hypoactive confusional syndrome.