European Psychiatry S95

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Introduction: Self-report questionnaires to screen for symptoms of common mental disorders (CMDs) are commonly used as inexpensive, easy-to-administer tools in research and clinical practice. However, their validity to detect the presence of any CMD across cultures and languages is unclear. Psychometrically sound and brief case-finding instruments are vital for the identification of individuals with mental health needs. With the increasing number of Arabic-speaking refugees in Europe, we aim to evaluate the diagnostic accuracy of Arabic-language screening instruments.

Objectives: The aim of this systematic review/meta-analysis is to synthesize the diagnostic accuracy of self-report questionnaires to detect depression, anxiety and posttraumatic stress disorder (PTSD) in Arabic-speaking populations.

Methods: Five databases were searched (inception-January 2021) (PROSPERO: CRD42018070645) for studies on the diagnostic accuracy of brief questionnaires in Arabic-speaking populations, with a clinical interview as reference standard. Data on sensitivity/specificity were extracted/calculated. Multi-threshold meta-analyses were performed (R diagmeta package). Study quality was assessed using QUADAS-2. Results: We included 32 studies (N=4042 participants) reporting on questionnaires targeting depression/anxiety (14 questionnaires), distress (2 questionnaires), and PTSD (1 questionnaire). Optimal thresholds were identified for the Edinburgh Postnatal Depression Scale (EPDS; cut-off 11, sensitivity 76.9%, specificity 85.1%), Hospital Anxiety and Depression Scale (HADS) anxiety subscale (cut-off 7, sensitivity 81.9%, specificity 87.6%), depression subscale (cut-off 6, sensitivity 73.0%, specificity 88.6%), and Self-Reporting Questionnaire (SRQ-20; cut-off 8, sensitivity 86.0%, specificity 83.9%).

Conclusions: We present optimal thresholds that can be used by clinicians and researchers for the EPDS, HADS and SRQ-20. More research on Arabic-language questionnaires, especially those targeting PTSD, is needed.

Disclosure: No significant relationships.

Keywords: diagnostic test accuracy; questionnaires; Common

mental disorders; sensitivity/specificity

O0084

Qualitative Study of Mental Health Improvements with Traditional Cultural Healers in North America

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doi: 10.1192/j.eurpsy.2022.277

Introduction: Traditional cultural healers -- their methods and their results -- are often invisible to conventional medical practitioners. When confronted with a result that does not make sense, we often ignore it. **Objectives:** We wanted to understand the process that happened between people and traditional cultural healers when these people experienced substantial improvement in mental health without psychiatric treatment.

Methods: We collected 56 case stories from people who consulted traditional cultural healers instead of conventional medical

practitioners for serious mental health problems. We confirmed the stories with family members and interviewed the healers as well. We used constructivist grounded theory to explore commonalities in the stories from the clients' points of view and from the healers' perspectives. The context is indigenous people in North America. Results: Patients had a range of diagnoses, including psychotic disorders (12), bipolar disorder (28), and evere unipolar depression (16). Co-morbid anxiety disorders were common (22). Improvement in mental health was associated with participation in ceremonies within a community, building relationships with members of that community, engaging in prescribed daily practices endorsed by that community, with a resulting report of feeling increases in social and spiritual connectedness. The healers believed strongly that the embeddedness in community contributed to the results and that spirit beings played important roles in helping people feel better. The use of psychiatric medications was minimal.

Conclusions: Psychiatry can acknowledge that people can have substantial improvements in mental health when working with traditional cultural healers outside of conventional settings. Studying these settings and results can improve conventional practice.

Disclosure: No significant relationships.

Keywords: anomalous outcomes; two-eyed seeing; indigenous philosophy; Indigenous people

Psychopharmacology and Pharmacoeconomics

O0086

Aggressive phenotype editing by modulated immune cells

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Introduction: In human society increased aggressiveness is one of the main social and health problems. Immune cells have a regulatory effect on the central nervous system functions, including regulation of behavior.

Objectives: The aim of the study was to investigate the effect of *in vitro* neuroleptic-modulated immune cells transplantation on behavioral phenotype and brain cytokines in aggressive syngeneic recipients.

Methods: (CBAxC57Bl/6) F1 aggressive male mice, developed in conditions of social confrontation, were undergoing the transplantation of syngeneic immune cells with *in vitro* chlorpromazine-modulated functional activity. Recipient's behavioral phenotyping was performed using modern hardware and software complex Etho-Vision XT. The brain cytokines content was assessed by ELISA.

Results: It was found that repeated experience of aggression, accompanied by victories, leads to a change in male mice behavior, which manifests itself by increased motor activity, irritability, severe anxiety, and the appearance of stereotypies. Transplantation of chlorpromazine-modulated splenocytes in aggressive recipient was accompanied by decreased motor activity in the Open Field, increased open arm activity in Plus Maze, reflects anti-anxiety behavior; decreased time spent close to the partition and the total duration of attacks after removal of the partitionin in resident-

S96 Oral Communication

intruder test, reflects decreased aggressive motivation. Behavioral changes in recipients were accompanied with cytokines brain changes: decreased IL-1 β , IL-2, IL-6, INF γ in the hippocampus; increased IL-4 and decreased INF γ in the hypothalamus; decreased IL-1 β in the frontal cortex.

Conclusions: Chlorpromazine - modulated immune cells have a positive aggressive behavior editing effect being involved in the central mechanisms underlying the development of aggressive reactions.

Disclosure: No significant relationships. **Keywords:** aggression; immune cells

O0087

SSRIs treatment did not completely restore affective state in patients with the initial clinically confirmed major depressive disorder/generalized anxiety disorder after COVID-19 disease

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doi: 10.1192/j.eurpsy.2022.279

Introduction: The major clinical outcomes of COVID-19 in the brain are associated with its deleterious neurological and mental health actions.

Today, there are limited findings concerning the studying of neuropsychiatric action for SARS-Cov-2 in humans after COVID-19 disease.

Objectives: The aim of the present study was to compare the efficacy of SSRIs (escitalopram, sertraline and fluoxetine) for 6 months therapy on the affective profile of man and women with the clinically confirmed Major Depressive Disorder (MDD) or Generalized Anxiety Disorder (GAD) cases following COVID-19 disease. **Methods:** For the assessment of affective profile in man and women (30-55 years) with the initial clinically confirmed MDD or GAD cases after COVID-19 disease, we used the different tests: Montgomery-Asberg Depression Rating Scale (MADRS) and anxiety scale (ShARS Scale). The hormonal and monoamines levels in the serum blood were measured by ELISA tests before and after SSRIs therapy.

Results: After 6 months of SSRIs therapy, MADRS Scale showed a incomplete disappearance of the depressive/anxiety manifestations in both men and women with the initial clinically confirmed MDD case after COVID-19 (p<0,05). We found that SSRIs were able to reduce depression/anxiety levels only on 20% in man or on 30% in women with the initial MDD case after COVID-19 before treatment. Conclusions: SSRIs treatmet alone failed to produce the decrease of depression/anxiety in the patients of both gender with the initial MDD or GAD diagnosis after COVID-19. The further randomized clinical trials involving new pharmacological therapies for psychiatric pations after COVID-19 disease are needed.

Disclosure: No significant relationships.

Keywords: Covid-19; depression; anxiety; SSRIs; pharmacotherapy

O0089

Clinical, genetic and environmental influences on weight gain and metabolic disorders induced by psychotropic drugs

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Introduction: Weight gain and obesity are important health problems associated with psychiatric disorders and/or with psychotropic drug treatments. There is a high inter-individual variability in the susceptibility to drug induced weight gain and/or other cardiometabolic disorders.

Objectives: To study the genetic and environmental risk factors for weight gain and onset of metabolic syndrome during psychotropic treatment

Methods: Analysis in PsyMetab, a large (n>3000) ongoing longitudinal prospective cohort study investigating cardiometabolic disorders in psychiatric patients.

Results: Aside from well-known clinical risk factors for metabolic worsening (e.g. young age, first episode status, rapid weight gain during the first month of treatment and/or low initial BMI), additional risk factors have been recently identified. We showed an inverse association between socio-economic status (SES) and worsening of cardiometabolic parameters, adult patients with a low SES having a three-fold higher risk of developing metabolic syndrome over one year versus patients with a high SES (n=366). In addition, a causal inverse effect of educational attainment on BMI was revealed using Mendelian randomization in the UKBiobank (n=30'069). Results from an epigenome-wide association study (EWAS) performed in 78 patients before and after one month of treatment and from a genome-wide association study (GWAS) in 1924 patients will also be presented.

Conclusions: Differences in clinical, genetic and environmental factors contribute to the differences in weight gain and metabolic disorders induced by psychotropic drugs. When starting a psychotropic drug at risk, a prospective monitoring of clinical (e.g. weight and blood pressure) and biochemical (fasting glucose, lipid levels) parameters is essential.

Disclosure: Prof. Eap received honoraria for conferences or teaching CME courses from Janssen-Cilag, Lundbeck, Otsuka, Sandoz, Servier, Sunovion, Vifor-Pharma, and Zeller in the past 3 years. The other authors report no potential conflicts of interest. This work has **Keywords:** Genetics; metabolic syndrome; psychotropic drugs; epigenetics

O0090

Comparative efficacy and safety of escitalopram, desvenlafaxine, and vortioxetine in the acute treatment of anxious depression: A randomized rater-blinded, 6-week clinical trial

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