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Glutamatergic dysfunction in resistant obsessivecompulsive disorder: An auditory mismatch negativity study

F. Syed¹*, N. Thatikonda², S. Arumugham², J. Narayanaswamy², V. Ganesan² and Y.J. Reddy²

¹Department Of Clinical Neurosciences, National Institute of Mental Health and Neurosciences, Bengaluru, India and ²Psychiatry, NIMHANS, Bengaluru, India

*Corresponding author.

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Introduction: Obsessive-compulsive disorder (OCD) patients with poor response to serotonin reuptake inhibitors (SRIs) may have dysfunction involving other neurotransmitters, including glutamate. Mismatch negativity (MMN), an event-related potential dependent on glutamatergic functioning, has not been studied in the adult OCD population and SRI non-responders.

Objectives: To compare the amplitude of MMN between OCD subjects who have responded(R) and not responded(NR) to SRIs, with healthy volunteers(HV).

Methods: MMN was measured in 15 OCD subjects fulfilling DSM-IV criteria (8 non-responders and 7 responders) and 22 healthy volunteers. Auditory MMN was measured using a multi-feature paradigm consisting of two variants each in frequency, duration, and intensity domains. EEG was recorded using 64 channel electrodes at 1000Hz. Epochs of 700 ms were extracted for each stimulus. MMN was evaluated as peak difference between the deviant and standard stimulus. MMN amplitudes at Fz were used for comparison between the groups using Kruskal-Wallis test followed by posthoc analysis, with significance set at p<0.05.

Results: There was no significant difference in age/gender distribution between the three groups and duration of illness between the two OCD groups. There was a significant difference in MMN amplitude of a frequency deviant between the three groups (H=7.312,P=0.026). Post-hoc pairwise analyses revealed a significant reduction in MMN amplitude in NRs as compared to the HV group (H=10.9,P=0.04).

Conclusions: The results are suggestive of glutamatergic dysfunction in OCD subjects with poor response to SRIs. The findings have to be replicated in larger samples employing other paradigms to evaluate glutamatergic functioning and have future potential in understanding treatment response to SRIs.

Keywords: Obsessive-Compulsive disorder; glutamate in OCD; mismatch negativity; resistant OCD

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Impaired emotion regulation in obsessive-compulsive disorder and hoarding disorder.

M. Puialto Amieiro

Psychiatry, Hospital Bellvitge, Barcelona, Spain doi: 10.1192/j.eurpsy.2021.1119

Introduction: There is suggestive evidence linking hoarding with several problems in emotional regulation, and though this is shared with OCD patients, it may not correlate to the presence of obsessive symptoms.

Objectives: The present study aimed to examine self-reported deficits in emotion regulation (ER) and obsessiveness among individuals with hoarding disorder (HD) in comparison with others with obsessive compulsive disorder (OCD) and healthy controls

Methods: Twenty-two adult outpatients with HD, twenty-two with OCD and twenty-two age and gender matched healthy control (HC) participants completed the Emotion Regulation Questionnaire (ERQ) which measures respondents tendency to regulate their emotions in two ways: Cognitive Reappraisal and Expressive Suppression. They fulfilled as well the OCI-R which evaluates six groups of OCD symptoms: Washing, Checking, Ordering, Obsessing, Hoarding, and Neutralizing.

Results: The HD and OCD groups scored higher, (p 0.04), on Cognitive Reappraisal than did the HC group. There was no significant difference between groups in Expressive Suppression. HD and HC groups scored significantly lower, (p < 0.001), in OCIR than OCD patients.

Conclusions: Results suggest that OCD and HD are characterized by self-reported deficits in ER, but this relationship in HD patients is not solely attributable to obsessive symptoms.

Keywords: Obesessive Compulsive Disorder; Hoarding Disorder; Emotional Regulation; Obsessiveness

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Alcohol-related dementia - an overlooked entity?

V. Nogueira*, M. Mendes, I. Pereira and J. Teixeira

Clínica 4 - Unidade De Alcoologia E Novas Dependências, Centro Hospitalar Psiquiátrico de Lisboa, Lisboa, Portugal

*Corresponding author.

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Introduction: The relationship between alcohol use and dementia is complex. There is a J-shaped relationship between alcohol use and cognitive impairment and evidence shows that one-quarter of the dementia population have alcohol related problems. It is estimated that alcohol-related dementia (ARD) contributes for about 10% of all cases of dementia, especially early-onset dementia, but is largely overlooked or seen as a comorbid factor.

Objectives: To clarify the relationship between alcohol use, alcohol-related brain damage and dementia; to review the clinical features, neuropathology, nosology and neuropsychology of ARD and alcohol-induced persisting amnestic syndrome (Wernicke-Korsakoff syndrome- WKS).

Methods: We performed a review of systematic reviews from the last 10 years. A total of 28 systematic reviews were identified.

Results: Heavy alcohol use has been shown to be a contributory factor and necessary factor in the development of multiple brain diseases. It may cause brain damage in multiple ways: direct neurotoxic effect of acetaldehyde; thiamine deficiency. It is also a risk factor for other conditions, such as hepatic encephalopathy, epilepsy and head injury.

Conclusions: Clinical observation favors the diagnosis of ADR as a distinct entity, but broader evidence reflects significant commonality between ARD and WKS, tough neuropsychological studies