

Conclusions: This workshop highlighted the importance of building the capacity of medical students to tackle the burden of Mental Health globally and within the region, and how similar student-led initiatives can further empower them to be change agents and impactful advocates for better Mental Health in their own communities.

Keywords: essentials; students; mental health; capacity building

EPP1013

An online forum to support consultant psychiatrists in their first five years of practice, introduced during the COVID-19 pandemic

T. Maclaren^{1,2*}, N. Ahmed³ and S. Edwards³

¹Faculty Of Medicine, Imperial College London, London, United Kingdom; ²Liaison Psychiatry, Central and North West London NHS Foundation Trust, London, United Kingdom and ³Medical Staff, Central and North West London NHS Foundation Trust, London, United Kingdom

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1257

Introduction: In the United Kingdom, the move from trainee to consultant psychiatrist can be both exciting and daunting. Trainee psychiatrists have access to support and weekly supervision that is not available to consultants. Having an organised meeting for new consultants could help bridge this gap with peer-led support.

Objectives: Improving support and guidance to new consultants Networking with peers Promoting wellbeing, good clinical practice and career development

Methods: We identified a group of 85 consultants in their first five years of practice. Meetings were held online using videoconferencing. Senior leaders presented at each meeting, with a group discussion at the end. We surveyed attendees using an online platform.

Results: We had excellent attendance rates from the group, with 30 to 45 consultants attending each webinar. Over 60% of attendees had been a consultant for less than a year. For 90%, this was their first experience of a new consultant forum. Attendees gave excellent feedback (Table). Being able to meet consultants from different specialties, hearing career stories from senior leaders and how they have managed the COVID-19 pandemic were cited as benefits.

Table: Feedback scores (0 = not useful to 100 = very useful)

Statement	Score
The forum helped me feel supported	75
Topics covered are relevant to me	79
I feel more connected with colleagues	71

Conclusions: The forum was popular and the feedback was excellent. Using an online format worked well and made it easier to organise and plan sessions. There is potential to implement similar fora for other senior psychiatrists across Europe.

Keywords: wellbeing; Staff; Support; psychiatrists

Psychoneuroimmunology

EPP1014

Gut microbiota and its implications for psychiatry

A. Matas Ochoa^{*}, A. Rodriguez Quiroga, R. Martinez De Velasco, P. Nava Garcia, C. Banzo Arguis and I. Moreno Alonso

Psychiatry, Hospital Universitario Infanta Leonor, Madrid, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1258

Introduction: In recent years there has been increasing interest in knowing the function of the microbiota, especially its role in the gut-brain axis. The microbiota is the set of millions of microorganisms that coexist in a symbiotic way in our body and are located in the digestive tract mainly. Numerous evidences show that the microbiota could modulate the information directed to the brain and therefore the pathogenic basis of numerous psychiatric and neurological disorders.

Objectives: A better understanding of the microbiota and its interaction with the brain and mental health.

Methods: Review of recent literature about the implications of the gut microbiota in psychiatry.

Results: The connection between the microbiota and the central nervous system (gut-brain axis) occurs through the vagus nerve, the systemic pathway (through the release of hormones, metabolites and neurotransmitters) and the immune system (through the action of cytokines). Changes in the microbiota are associated not only with gastrointestinal diseases, but also with disorders such as depression, anxiety, autism, anorexia, attention deficit and hyperactivity, Alzheimer's disease and Parkinson's disease. As some research indicates, changes in diet and composition of the microbiota can reduce the risk of suffering these diseases or reduce their symptoms. Other therapeutic alternatives postulated are the use of probiotics or fecal microbiota transplantation.

Conclusions: Despite growing interest in the microbiota in the last few years, little is known about the mechanisms underlying this communication. More research is expected to contribute to the design of strategies that modulate the gut microbiota and its functions in order to improve mental health.

Keywords: microbiota; gut; brain; psychiatry

EPP1015

Childhood trauma and mental disorders: Exploring the relationship between trauma, immunity and psychosis.

I. Figueiredo^{1*}, F. Viegas², F. Ferreira³ and C. Manuel²

¹Mental Health Department, Hospital Professor Doutor Fernando Fonseca, Lisboa (Amadora), Portugal; ²Mental Health Department, Hospital Professor Doutor Fernando Fonseca, Lisboa (Amadora), Portugal and ³Psychiatry, Hospital Professor Doutor Fernando Fonseca, Lisboa (Amadora), Portugal

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1259

Introduction: A relationship between childhood trauma, psychotic experiences, and psychosis is well established, although causality is not yet ascertained. There are several hypotheses linking trauma and

psychosis, regarding genetic vulnerability and/or other environmental factors, possibly also mediated by psychological mechanisms. Long-term modifications to the transcriptome are likely mediated by epigenetic mechanisms. There is also growing evidence supporting an association between childhood trauma and adulthood dysregulation of the immune system, which could help clarify the relationship between trauma and mental disorders, namely psychosis.

Objectives: Review evidence regarding the relationship of childhood trauma, immune system and psychosis.

Methods: Literature review using Medline database.

Results: The prevalence and severity of childhood trauma is characterized by both biological alterations and increased risk of experiencing symptoms of psychosis. Childhood trauma, namely through its effects on IL6 levels, may be a risk factor for schizophrenia in general. Some studies point to a direct relationship between childhood trauma, immunity and psychosis when examined along a continuum from non-clinical controls to psychotic disorders such as schizophrenia.

Conclusions: For better understanding this association, these findings must be replicated in larger cohorts. If the impact of childhood trauma on immune function in adulthood does indeed contribute to psychopathology, an improved understanding of this relationship may lead to new and possibly more specific treatment options. Other clinical implications of these findings include increased emphasis in establishing more comprehensive screening of early trauma in patients with psychotic symptoms, as well as the importance of screen and follow children who report traumatic events for emergence of psychotic symptoms.

Keywords: childhood trauma; immune system; psychosis

EPP1017

Systemic endotoxemia as a probable factor in reducing the treatment effectiveness of endogenous psychosis

S. Zozulya^{1*}, I. Otman¹, I. Oleichik², I. Anikhovskaya³, M. Yakovlev³ and T. Klyushnik¹

¹Laboratory Of Neuroimmunology, Mental Health Research Centre, Moscow, Russian Federation; ²Clinical Department Of Endogenous Mental Disorders And Affective States, Mental Health Research Centre, Moscow, Russian Federation and ³Laboratory Of Systemic Endotoxemia And Shock, Institute of General Pathology and Pathophysiology, Moscow, Russian Federation

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1260

Introduction: Inflammation is an important factor in the pathogenesis of endogenous psychosis. An inducer of inflammatory reactions can be endotoxin aggression of intestinal origin.

Objectives: To determine the level of inflammation markers and indicators of systemic endotoxemia in blood of patients with endogenous psychosis in relation to assessment of the treatment effectiveness.

Methods: 25 patients with endogenous psychosis (F20, F25) were examined before and after treatment. The control group consisted of 25 healthy people. The activity of inflammatory markers - leukocyte elastase, α 1-antitrypsin, antibodies to S-100B, and indicators of systemic endotoxemia - endotoxin concentration and antiendotoxin immunity activity were measured in blood serum. The treatment effectiveness was assessed by the dynamics of inflammatory markers.

Results: Based on the results of determining the studied parameters before treatment, all patients were divided into two groups. In the

1st group (6 patients, 24%), an increase of inflammatory markers activity and high concentration of endotoxin in the blood serum were revealed ($p < 0.001$, $p < 0.05$, respectively). In the 2nd group (19 patients, 76%), only activation of inflammatory reactions ($p < 0.001$) was detected. After therapy in the 1st group of patients, there was no positive dynamics of all studied markers, which indicated an active course of the pathological process. In the 2nd group, the normalization of inflammatory markers was shown ($p < 0.05$), which corresponded to the formation of remission.

Conclusions: The results indicate that endotoxic aggression contributes to reduction of the effectiveness of endogenous psychosis therapy and can be considered as an additional therapeutic target.

Keywords: endogenous psychosis; inflammatory markers; treatment effectiveness; systemic endotoxemia

EPP1018

Immune heterogeneity of non-psychotic mental disorders

S. Zozulya^{1*}, L. Androsova¹, I. Otman¹, T. Vetlugina², V. Nikitina² and T. Klyushnik¹

¹Laboratory Of Neuroimmunology, Mental Health Research Centre, Moscow, Russian Federation and ²Laboratory Of Clinical Psychoneuroimmunology And Neurobiology, Mental Health Research Institute, Tomsk National Research Medical Center, Tomsk, Russian Federation

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1261

Introduction: Current studies indicate the involvement of inflammation in the pathogenesis of chronic non-infectious diseases, and therefore it is of interest to study the role of inflammation markers in non-psychotic mental disorders (NPMD).

Objectives: To identify a number of inflammatory markers in serum of patients with NPMD.

Methods: 73 patients with NPMD were examined (F43.2; F06.6). The comparison group consisted of 76 patients with endogenous psychosis (EGP) (F20.0; F25.0). The control group included 80 healthy people. The serum activity of leukocyte elastase (LE), α 1-proteinase inhibitor (α 1-PI) and the level of autoantibodies (aAb) to neuroantigens were determined.

Results: Three groups of patients with different variants of inflammatory response to the pathological process were identified. In group 1 (23.3%), all indices corresponded to the control values, which indicated the absence of the pathological process in brain. In group 2, there was a significant increase in activity both LE and α 1-PI compared to control ($p < 0.05$). This type of immune reaction characterized a balanced inflammatory response. It was found in 52% of patients with NPMD and in all patients with EGP. The aAb level also exceeded the control values ($p < 0.05$). Group 3 (24.7%) showed an increase in α 1-PI activity ($p < 0.05$), but not in LE activity compared to control. Insufficient LE activity reflects a decrease in the functional activity of neutrophils.

Conclusions: The immune heterogeneity of NPMD according to the level of inflammatory markers was identified. 52% of patients with NPMD have a pronounced activation of inflammatory reactions accompanied by increased levels of aAb to neuroantigens.

Keywords: non-psychotic mental disorders; inflammatory markers