

Methods: A case study of 36 year old female presented with clinical manifestations of autoimmune encephalitis syndrome.

Results: Diagnosis confirmed by presence of NMDA receptor antibodies in serum and cerebrospinal fluid.

Conclusions: Early recognition of clinical features of Anti-NMDA receptor encephalitis and early initiation of treatment has shown to improve outcomes, speed recovery and reduce the risk of relapses.

Disclosure: No significant relationships.

Keywords: encephalitis; anti-nmda receptor encephalitis

EPV0397

The right temporoparietal junction and cooperation dilemma

S. Tei^{1,2,3,4,*} and J. Fujino^{1,4,5}

¹Department Of Psychiatry, Kyoto University, Kyoto, Japan; ²Institute Of Applied Brain Sciences, Waseda University, Saitama, Japan; ³School Of Human And Social Sciences, Tokyo International University, Saitama, Japan; ⁴Medical Institute Of Developmental Disabilities Research, Showa University, Tokyo, Japan and ⁵Department Of Psychiatry And Behavioral Sciences, Tokyo Medical and Dental University, Tokyo, Japan

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1952

Introduction: Cooperation is a key component of our lives. When we identify people in need, we are frequently motivated to cooperate by overcoming selfishness. However, we may also become selfish to pursue greater gains by putting ourselves at risk and exploiting others. Such cooperation dilemmas are ubiquitous in real life. Although functional magnetic resonance imaging studies have repeatedly reported the involvement of right temporoparietal junction (rTPJ) in cooperation dilemmas, a causal link between the two has been rarely explored.

Objectives: To investigate a causal role of rTPJ in resolving cooperation dilemmas in ecologically valid settings.

Methods: Twenty-two healthy volunteers were examined. We combined repetitive transcranial magnetic stimulation (rTMS) with a snowdrift cooperation dilemma game task (cross-the-traffic intersection version) wherein either cooperation or defection should be chosen. Participants and opponents jointly faced a problem at the intersection where their cooperation could diffuse the situation (stopping/avoiding a car-crash). This conflicted with a choice in the participant's self-interest which was more rewarding, but risky (not stopping/defection). We also included explicit-cue condition that showed elderly/pregnant passengers in the opponent's car. Furthermore, we measured participants' empathic-traits (e.g., perspective-taking) to study personality-cooperation associations.

Results: The cooperation-ratio did not statistically differ between the sham stimulation and inhibitory continuous theta burst stimulation (cTBS) in both the no-cue and with-cue conditions. However, after cTBS, only in the no-cue condition, the strength of the relationship between cooperation-ratios and empathic-traits decreased significantly ($p < 0.05$).

Conclusions: These results contribute to our understandings of rTPJ's role in spontaneous social cognition, which may be considerably complex and require further examination.

Disclosure: No significant relationships.

Keywords: temporoparietal junction; cooperation; transcranial magnetic stimulation; decision making

EPV0398

Sense of coherence, spontaneous brain activity, and burnout severity

S. Tei^{1,2,3,*} and J. Fujino^{1,4}

¹Department Of Psychiatry, Kyoto University, Kyoto, Japan; ²Institute Of Applied Brain Sciences, Waseda University, Saitama, Japan; ³School Of Human And Social Sciences, Tokyo International University, Saitama, Japan and ⁴Department Of Psychiatry And Behavioral Sciences, Tokyo Medical and Dental University, Tokyo, Japan

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1953

Introduction: Burnout has become a critical issue in health care systems during the COVID-19 pandemic. Several studies report on the importance of peoples' sense of coherence (SOC) or control over work for dealing with burnout. SOC implicates a stress-coping capacity involving comprehensibility, manageability, and meaningfulness. However, little is known on how SOC cognitively modulates burnout experiences.

Objectives: To investigate neurocognitive mechanisms of SOC and burnout in medical professionals.

Methods: Forty-one registered nurses were enrolled. We used functional magnetic resonance imaging and measured resting-state brain activity. We identified brain regions associated with SOC and burnout levels by correlating these trait scores to regional fractional amplitude of low frequency fluctuations (fALFF). Subsequently, we investigated whether participants' levels of SOC impacted their fALFF-burnout association by mediation analysis.

Results: SOC and depersonalization dimension of burnout were negatively correlated ($p < 0.01$). The fALFF in the mid-dorsolateral prefrontal cortex (DLPFC) correlated positively with SOC scores, and negatively with depersonalization dimension of burnout ($p < 0.05$). Furthermore, SOC mediated the negative relationship between DLPFC activity and burnout severity ($p < 0.05$).

Conclusions: Our data suggested that SOC alleviates burnout experience and supports prefrontal activity to prompt cognitive control; they may facilitate flexible shifting of perspective and optimistic reappraisal of work-stress. In effect, workplace-stressors may be acknowledged as being more meaningful than distressing. Without sufficient SOC, frequent exposures to stressors can lead to maladaptive coping to exhibit emotional numbing or depersonalization.

Disclosure: No significant relationships.

Keywords: sense of coherence; burnout; medical professionals; fMRI

EPV0399

An fMRI study of decision-making under conflict in individuals with autism spectrum condition

S. Tei^{1,2,3,4,*} and J. Fujino^{1,4,5}

¹Department Of Psychiatry, Kyoto University, Kyoto, Japan; ²Institute Of Applied Brain Sciences, Waseda University, Saitama, Japan; ³School Of Human And Social Sciences, Tokyo International University,