EPV1046
Premorbid depressive youth at clinical high-risk for psychosis
M. Omelchenko
Mental Health Research Centre, Youth Psychiatry, Moscow, Russian Federation
doi: 10.1192/j.eurpsy.2022.1757

Introduction: Early detection of psychosis is a promising area in preventive psychiatry. The use of early intervention can prevent the first episode psychosis and improve outcomes.

Objectives: Identification of premorbid features of depressive patients at clinical high risk for psychosis (CHR) comparing with depressive patients without CHR in order to improve early recognition of the psychotic process.

Methods: 219 young depressive in-patients with CHR criteria for SOPS with attenuated positive and attenuated negative symptoms and 52 young depressive in-patients without CHR were examined. Presence of obstetric complications, neurodevelopmental deviance, neurological and psychiatric signs at the premorbid stage, and the level of premorbid functioning on the PAS were examined.

Results: It has been established that depressive patients at CHR and without CHR had some obstetric complications (57.5% and 40.4%, respectively). Neurodevelopmental deviance in the first year of life was in 57.5% patients with CHR. At the age of 3-5 sleep disorders, ADHD and phobias were more common in patients at CHR than without it (58.8% and 32.7%, p=0.014). In pubertal, patients at CHR were more likely to show depression symptoms, obsessions, and aggression - 90.4% versus 76.9% (p=0.029). On the PAS scale, a decrease of the level of premorbid functioning has been observed in two groups of patients with and without CHR from the age of 12: from 12 to 15 years, 0.4 and 0.3 (p=0.004), from 16 to 18 years, 0.47 and 0.37 (p 0.001).

Conclusions: Premorbid functioning were worst in patients with CHR, which indicates the possibility of early clinical detection of psychosis.

Disclosure: No significant relationships.

Keywords: Youth depression; prevention; Clinical high-risk; premorbid

EPV1047
Premorbid screening of healthy students may carry latent liability for schizophrenia or bipolar affective disorder with neurocognitive and neurophenomenological methods
I. Szendi Md Habil1,2, A. Bagi1, S. Szalóki1, E. Hallgató3, N. Domján1, A. Kanka1, B. Gál1, É. Karcher1, H. Pásztor1, T. Jenei2, O. Bóna2, C. Kovács2, A. Pejin1, J. Daróczy1, Á. Diósi1, P. Pajkossy4,5, B. Polner4, G. Demeter4, M. Racsmány4,5, M. Baradits6, A. Búzás7, A. Dér7, Z. Gingl8 and T. Gyimóthi9

Introduction: Early detection of psychosis is a promising area in preventive psychiatry. The use of early intervention can prevent the first episode psychosis and improve outcomes.

Objectives: Identification of premorbid features of depressive patients at clinical high risk for psychosis (CHR) comparing with depressive patients without CHR in order to improve early recognition of the psychotic process.

Methods: 219 young depressive in-patients with CHR criteria for SOPS with attenuated positive and attenuated negative symptoms and 52 young depressive in-patients without CHR were examined. Presence of obstetric complications, neurodevelopmental deviance, neurological and psychiatric signs at the premorbid stage, and the level of premorbid functioning on the PAS were examined.

Results: It has been established that depressive patients at CHR and without CHR had some obstetric complications (57.5% and 40.4%, respectively). Neurodevelopmental deviance in the first year of life was in 57.5% patients with CHR. At the age of 3-5 sleep disorders, ADHD and phobias were more common in patients at CHR than without it (58.8% and 32.7%, p=0.014). In pubertal, patients at CHR were more likely to show depression symptoms, obsessions, and aggression - 90.4% versus 76.9% (p=0.029). On the PAS scale, a decrease of the level of premorbid functioning has been observed in two groups of patients with and without CHR from the age of 12: from 12 to 15 years, 0.4 and 0.3 (p=0.004), from 16 to 18 years, 0.47 and 0.37 (p 0.001).

Conclusions: Premorbid functioning were worst in patients with CHR, which indicates the possibility of early clinical detection of psychosis.

Disclosure: No significant relationships.

Keywords: Youth depression; prevention; Clinical high-risk; premorbid

EPV1048
Sustainability for humans and the humane from a pediatric point of view
Á. Victorin
Gothenburg Public health, School Medicine, Hovås, Sweden
doi: 10.1192/j.eurpsy.2022.1759

Introduction: We need to live in harmony with our lifestyle rhythms to stay healthy. A problem in our time is that technical devices have no respect for rhythm. If we get caught up in the techniques and start neglecting our natural body needs such as sleep, eat and exercise – it will affect our health negatively. Today, children have increasing problems with mental health. When analyzing the problem we find rhythmical problems, often associated to technology. Being a parent in our time is hard. Time has come for us to take active care of our natural rhythms, to stay healthy.