

Methods: We performed an updated review in the PubMed database using the terms “circadian rhythm” and “bipolar affective disorder”.

Results: Irregularity of the sleep–wake rhythm, eveningness chronotype, abnormality of melatonin secretion, vulnerability of clock genes, and the irregularity of social time cues are circadian rhythm markers disrupted in bipolar affective disorder. Circadian rhythm dysfunction might be a trait marker of this illness and can act as a predictor for the first onset of bipolar affective disorder and the relapse of mood episodes. Achieving normalization of circadian rhythm in combination with pharmacological, psychosocial and chronobiological treatments can be a tool for managing bipolar affective disorder.

Conclusions: Recognizing patterns of changes in circadian rhythms is important to detect and diagnose bipolar disorder in clinical practice, also affecting treatment. These alterations are often overlooked and can lead to inadequate treatment and management.

Keywords: bipolar affective disorder; Circadian rhythm

EPP0046

Quality of life in euthymic patients with bipolar disorder

N. Smaoui^{1*}, I. Lajmi², A. Guermazi¹, M. Maalej Bouali¹, S. Omri¹, R. Feki¹, L. Zouari¹, N. Charfi¹, J. Ben Thabet¹ and M. Maalej¹

¹Psychiatry C Department, Hedi Chaker university hospital, sfax, Tunisia and ²Department Of Psychiatry “c”, Hedi Chaker University Hospital, Sfax, Tunisia, Sfax, Tunisia

*Corresponding author.

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Introduction: Patients with bipolar disorder (BD) frequently experience residual symptoms, problems in psychosocial functioning, cognitive impairment, and poor quality of life (QOL).

Objectives: * To evaluate the QOL of euthymic patients with BD compared to healthy controls (HC). * To identify factors associated with its deterioration.

Methods: This is a comparative and analytical study, conducted over 3 months, involving 30 euthymic patients with BD, followed up in the outpatient psychiatry department of Hedi Chaker University Hospital in Sfax (Tunisia). They were compared to 34 HC. General, clinical and therapeutic data were collected using a pre-established questionnaire. QOL was assessed with the «36 item Short-Form Health Survey» (SF-36).

Results: The mean ages of BD patients and HC were 44.17 years and 40.1 years, respectively. Compared with HC, patients with BD had decreased overall SF-36 scores (53.73 vs 73.78; $p=0.000$) and decreased physical and psychological subdomain scores ($p=0.001$; $p=0.000$). The study of the relationship between the dimensional average scores and different variables revealed correlations between; physical health problems and somatic disease ($p=0.021$) and unemployment ($p=0.001$), impaired general health and somatic disease ($p=0.02$) and psychotropic association ($p=0.021$), emotional health problems and psychiatric family history ($p=0.023$), pain and psychotropic association ($p=0.031$), and impaired global QOL and psychiatric family history ($p=0.05$).

Conclusions: Our results confirm the impairment of the QOL of patients with BD even in euthymic periods. Many factors have been associated, including demographic and clinical variables. The improvement of QOL is to consider these factors in the management of these patients.

Keywords: bipolar disorder; quality of life; euthymic patients

EPP0049

Bipolar disorder and peripartum mood episodes: Epidemiology and clinical correlates.

E. Aragno^{1*}, G. Di Salvo², G. Rosso² and G. Maina¹

¹Department Of Neurosciences “rita Levi Montalcini”, University of Turin, torino, Italy and ²Department Of Neurosciences Rita Levi Montalcini, University of Turin, Turin, Italy

*Corresponding author.

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Introduction: It is known that the peripartum period is a high-risk period of recurrence in bipolar disorder (BD). However, data on correlations between reproductive life events, such as age at menarche and peripartum period, are mixed in BD.

Objectives: The aims of this retrospective study are to investigate the lifetime rate of peripartum mood episodes, the clinical correlates and the relationship between age at menarche and peripartum episode in a sample of women with BD.

Methods: The study focused on comparisons between women with vs. without peripartum mood episodes ($n = 292$). Socio-demographic and clinical characteristics between women with vs without BD peripartum episode were examined through descriptive statistics. Adjusted logistic regression analysis was run to examine the association between variables.

Results: In our sample, 30% had at least one BD peripartum episode. Women with peripartum episode had significantly earlier age at menarche, earlier onset of BD and longer duration of untreated disorder compared to women without peripartum episode. After adjustment, the late menarche (>15 years) was associated with lower probability of BD episodes during the peripartum period compared to normal menarche (12-14 years).

Conclusions: Peripartum mood episodes are common in BD and are correlated with early onset of BD and long duration of untreated disorder. Moreover, age at menarche may be related to the risk of peripartum mood episodes. The results deserve to be deepened in further studies.

Keywords: bipolar disorder; women; reproductive cycles; peripartum episodes

EPP0052

Bipolar disorders distribution in the two genders: An analysis of recently published large sample studies

R. Cafaro^{1*}, B. Dell’Osso¹ and T. Ketter²

¹Department Of Biomedical And Clinical Sciences Luigi Sacco, University of Milan, Milan, Italy and ²Department Of Psychiatry And Behavioural Sciences, Stanford University, Stanford, United States of America

*Corresponding author.

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Introduction: In the last decade, literature reports evidences of a growing number of patients diagnosed with Bipolar Disorders (BD), however, only few data are available regarding the distribution of BD diagnosis in the two genders. In fact, although many studies show differences in presentation and comorbidities of BD in the two genders, BD are commonly perceived as equally affecting both women and men. On the other hand, BD in female patients

can often be misdiagnosed as MDD, especially because of the higher number of depressive episodes that characterize BD in women.

Objectives: We aimed to analyse the gender composition of large samples, recently published studies on BD, in order to evaluate a possible modification of representation of BD in the two genders.

Methods: An electronic review of literature was conducted, and results were filtered by year of publication (2011-2020) and number of patients (> 1,000).

Results: Our results show a higher number of female patients in every study evaluated (N=10). Of note, we found a higher number of females also in BD-I subsamples, in contradiction with previously published literature.

Conclusions: Even if with limitations connected to the design of the study, our study supports the hypothesis of a gender specific increment in BD diagnosis, and could lead the way for large epidemiological studies assessing gender specific prevalence of BD in the general population. Given the risks connected with untreated BD, and with antidepressants monotherapy, a better understanding of BD epidemiology could help physicians adequately diagnose and treat affected subjects.

Keywords: Bipolar Disorders; Gender; prevalence

EPP0053

Behaviour problems of patients with bipolar disorder

I. Kammoun* and N. Halouani

Psychiatry B, Hedi Chaker UHC, Sfax, Tunisia

*Corresponding author.

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Introduction: Bipolar disorder is associated, in popular belief, with violence as any psychiatric pathology. Studies in recent years have found an increased risk of violence in patients with bipolar disorder.

Objectives: To describe the socio-demographic characteristics of bipolar patients and identify the various risk factors for violence.

Methods: We conducted a retrospective descriptive, analytical study, including patients with bipolar disorder type I and II in the CHU HEDI CHAKER Sfax psychiatry department whose reason for hospitalization was hetero-aggressiveness during a period of 6 months ranging from 1 January to 30 June 2019.

Results: We've collected 32 patients. The average age of our sample is 36 years. Half of the patients (50%) were single. Most of these patients were unemployed. The type of bipolar disorder was dominated by type I (90.3%) in a manic episode. These patients had antisocial pathological personality in 18.8% and borderline personality in 20%. Siblings and ascendants accounted for 68.7% of victims of violence. Our study showed that comorbidity to the use of psychoactive substances was present in 65.6%. The exaltation of mood was intense in 78.1% with a bad insight in 75%. Patients with violent behaviour were discontinued in 96.9% of cases with poor therapeutic adherence in 90.6% and irregular follow-up in 68.8%. Violence was significantly associated with psychoactive substance use with $p=0.037$.

Conclusions: The risk of violence in patients with bipolar disorder is higher than in the general population. This risk is particularly high if there was an association with substance abuse and personality disorders.

Keywords: bipolar disorder; behaviour problems; Risk factors; psychoactive substance use

EPP0054

Impulsivity and socio-demographic variables among bipolar disorder patients

S. Ajmi^{1*}, S. Najjar², I. Baati² and J. Masmoudi³

¹Psychiatrie A, hospital University Hedi Chaker, sfax, Tunisia;

²Psychiatrie A, hedi chaker hospital, Sfax, Tunisia and ³Psychiatrie "a" Department, Hedi Chaker Hospital University -Sfax - Tunisia, sfax, Tunisia

*Corresponding author.

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Introduction: Impulsivity is a psychiatric symptom that seems to be more prevalent in some mental disorders such as bipolar disorders (BD). It is a trait that seems to be influenced by many socio-demographic variables across BD.

Objectives: The aim of our study is to examine the relationship between impulsivity and these variables.

Methods: We performed a cross sectional study on 30 patients diagnosed with BD and consulting at the Psychiatric department of Hedi Chaker Hospital. Patients were euthymic during the time of the study confirmed by administration Young Mania Rating Scale (YMRS) and Montgomery Depression Rating Scale (MDRS). The socio-demographic data was obtained. Impulsivity was evaluated using the Barratt Impulsiveness Scale (BIS-11)

Results: The study sample consisted of 30 patients (10 men and 20 women). The mean age of the sample was 45.83 years (SD= 11. 63). Seventeen patients (56.7%) were married. More than half of the subjects (76.7%) were unemployed and 26.7% were not educated. Of the studied patients 83.3% were drug free, 43.3% were smoker and 16.7% were alcoholic. The mean BIS11 score was 75. 60 (SD=5.51) and 76.7% had a high level of impulsivity. No correlation was found between the level of impulsivity (BIS-11 scores) and age, gender, marital status, being a current smoker, using drug or alcohol or job status ($p=0.082$; $p=0.760$; $p=0.087$; $p=0.977$; $p=0.847$; $p=0.708$).

Conclusions: Further studies should be realized to fully characterize impulsivity in BD and, therefore, make it a target for future therapeutic models.

Keywords: Impulsivity; sociodemographic; bipolar disorder

EPP0055

Clinical profile and outcome of bipolar disorder patients receiving electroconvulsive therapy

W. Bouali*, R. Omezzine Gniwa, R. Ben Soussia, A. Hadj Mohamed and L. Zarrouk

Department Of Psychiatry, University Hospital Of Mahdia, Tunisia., Psychiatry, Mahdia, Tunisia

*Corresponding author.

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Introduction: Bipolar disorder (BD) is a serious and extremely recurrent illness frequently associated with cognitive and functional deterioration that poses many treatment challenges. However, over the years, with the evolution of more and more mood stabilizers and neuroleptics, there were controversies surrounding the use of electroconvulsive therapy (ECT).

Objectives: The present study was an attempt at studying the clinical profile of BD patients who receive ECT and to study its effectiveness.