

EPP0663

Qualitative description of work of a psychotherapy group in the context of COVID pandemic.

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Introduction: COVID pandemic very much influenced therapeutic organisation of psychiatric care. This also applies to our hospital. Especially therapeutic activities in stationary wards.

Objectives: We would like to show changes occurring in psychotherapy group of the patients with psychotic disorder in the stationary ward in core of pandemic.

Methods: I would like to present a qualitative description of psychotherapy group in the context of COVID. The group is designed for patients with experience of psychosis, grounded in psychodynamic school and has a long tradition at an acute admission in stationary psychiatric department.

Results: During the pandemic there were epidemiological constraints. From six members of personnel in the basic assumptions, we reduced to minimum. So from two co-therapists, reflecting team and an observer, we ended leading the group every second time with one of the therapists. Despite of our efforts to maintain a continuous group, the group was closed for more than half a year and then reactivated based on old rules and roots, but less consistent memory of group members. During this most strict reduction of personnel, which would never have been accepted apart from the pandemic restrictions appeared a few interesting phenomenon. One of them was - twin groups. With the colleague we lead the group every second time. The group shows us a similar picture twice.

Conclusions: As we understand, twin groups is a way to try to keep this group together in its already damaged setting. For the moment the abstract submission group is continuing to work within its present arrangement.

Disclosure: No significant relationships.

Keywords: Psychosis; stationary psychiatric department; Psychotherapy; COVID pandemic

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Successful mentalizing in schizophrenia is associated with specific recruitment of ventromedial prefrontal cortex and precuneus

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Introduction: Patients with schizophrenia have difficulties in cognitive and affective mentalizing which is manifested by excessive ('overmentalizing') or defective ('undermentalizing') attribution of mental states. As most of the tests does not differentiate between

'overmentalizing' and 'undermentalizing', it is not yet clear how are these deficits reflected in mentalizing network in schizophrenia.

Objectives: Investigate how is cognitive and affective 'overmentalizing' and 'undermentalizing' reflected in mentalizing network in schizophrenia.

Methods: We recruited 30 schizophrenia patients and 30 healthy controls who underwent fMRI session while they completed 'Social situations assessment task' consisting of 90 stories with 30 questions on affective, 30 on cognitive mental states and 30 control memory questions and 4 possible answers: no mentalizing, undermentalizing, appropriate mentalizing, overmentalizing (for control condition 1 correct and 3 incorrect).

Results: On a behavioral level, we found increased no mentalizing and undermentalizing and decreased mentalizing in patients, but no difference in overmentalizing between groups. For fMRI results, patients showed lesser recruitment of dorsomedial prefrontal cortex and temporal poles (with right superior temporal sulcus) only during appropriate mentalizing in both affective and cognitive conditions. However, ventromedial prefrontal cortex and precuneus showed increased pattern of activation across all mentalizing levels in healthy controls compared to schizophrenia, but suppressed activation in appropriate cognitive mentalizing corresponding to the level of a schizophrenia group.

Conclusions: Schizophrenia patients show different pattern of mentalizing compared to healthy control that can be associated with specific activity mentalizing brain network.

Disclosure: No significant relationships.

Keywords: schizophrenia; social cognition; fMRI; mentalizing

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Vascular risk factors affect different brain regions in people with Alzheimer's disease

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Introduction: Vascular risk factors including hypertension, diabetes and dyslipidaemia promote diverse pathological mechanisms in the brain leading to cerebral hypoperfusion and ultimately cognitive decline in people. Medial temporal, medial frontal and anterior cingulate atrophy has been closely associated with diabetes and medial temporal lobe atrophy is associated with hypertension in people with Alzheimer's disease (AD).

Objectives: To assess if hypertension, diabetes and dyslipidaemia have differential effects on different brain locations using brain imaging in people with AD.

Methods: The current study is based on [¹⁸F] fluorodeoxyglucose-positron emission tomography (FDG-PET) data of 970 participants from two large Phase III multi-centre clinical trials of a novel tau aggregation inhibitor drug Leuco-Methylthioninium (LMTX) meeting research criteria for mild to moderate AD. Vascular risk