Sleep disorders & stress

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The relationship between sleep disorders and psychotic-like symptoms in the general population

L. Fusar-Poli^{1*}, T. Surace¹, A. Aguglia² and E. Aguglia³

¹Department Of Clinical And Experimental Medicine, University of Catania, Crema (CR), Italy; ²Department Of Neuroscience, Rehabilitation, Ophthalmology, Genetics Maternal And Child Health, University of Genoa, Genoa, Italy and ³Department Of Clinical And Experimental Medicine, University of Catania, Catania, Italy

*Corresponding author.

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Introduction: Abnormalities of sleep patterns are common in people with psychiatric disorders and often represent a source of distress, worsening the outcome. However, little is known about the relationship between psychotic-like symptoms and sleep disorders in the general population.

Objectives: 1. Whether there is a relationship between sleep disorders and psychotic-like experiences in a sample of individuals belonging to the general population. 2. Which sleep disorders are more commonly associated with psychotic-like experiences.

Methods: A web survey was spread through social networks. We administered the SLEEP-50 to investigate the presence of sleep disorders and the Community Assessment of Psychic Experience (CAPE) for psychotic-like symptoms. Moreover, socio-demographic characteristics of participants were collected.

Results: The web-survey was completed by 824 participants. Six people refused to give consent and 95 were excluded because they declared to suffer from psychiatric disorder or other medical conditions potentially influencing on sleep. Therefore, 729 subjects were included in the analysis. Pearson correlation coefficients showed strong correlations between the scale regarding SLEEP-50 "All sleep disorders" scale and CAPE Total and Depressive scales ($r = 0.52$, $p < 0.001$). A moderate correlation was found between "All sleep disorders" and CAPE Negative ($r = 0.49$) and Positive ($r = 0.32$) scales. Correlations with specific SLEEP-50 subscales were also found.

Conclusions: There seems to be a strong relationship between psychotic-like symptoms and sleep problems in the general population. Our findings might indicate that some sleep abnormalities may represent earlier symptoms of a psychiatric condition and need to be always monitored even in the non-psychiatric population.

Disclosure: No significant relationships.

Keywords: psychotic-like symptoms; sleep disorders; General population; Insomnia

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Reduced sleep time is associated with increases in frontal sleep-like activity and emotion regulation failures

G. Avvenuti^{1*}, D. Bertelloni², G. Lettieri³, E. Ricciardi⁴, L. Cecchetti³, P. Pietrini⁴ and G. Bernardi¹

¹Momilab - Space Group, IMT School for Advanced Studies, Lucca, Italy; ²University Of Pisa, University of Pisa, Pisa, Italy; ³Momilab -

Sane Group, IMT School for Advanced Studies Lucca, Lucca, Italy and ⁴Momilab, IMT School for Advanced Studies, Lucca, Italy

*Corresponding author.

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Introduction: Emotion self-regulation relies both on cognitive and behavioral strategies implemented to modulate the subjective experience and/or the behavioral expression of a given emotion.

Objectives: While it is known that a network encompassing fronto-cingulate and parietal brain areas is engaged during successful emotion regulation, the functional mechanisms underlying failures in emotion suppression are still unclear.

Methods: We analyzed facial-view video and high-density EEG recordings of nineteen healthy adult subjects (26 ± 3 yrs, 10F) during an emotion suppression (ES) and a free expression (FE) task performed on two consecutive days. An actigraph was worn for 7-days and used to determine sleep-time before each experiment. Changes in facial expression were identified and manually marked on the video recordings. Continuous hd-EEG recordings were preprocessed using standard approaches to reduce artifactual activity and source-modeled using sLORETA.

Results: Changes in facial expression during ES, but not FE, were preceded by local increases in sleep-like activity (1-4Hz) in brain areas responsible for emotional suppression, including bilateral anterior insula and anterior cingulate cortex, and in right middle/inferior frontal gyrus ($p < 0.05$, corrected; Figures 1 and 2). Moreover, shorter sleep duration the night prior to the ES experiment correlated with the number of behavioral errors ($p = 0.01$; Figure 3) and tended to be associated with higher frontal sleep-like activity during emotion suppression failures ($p = 0.05$).

Conclusions: These results indicate that local sleep-like activity may represent the cause of emotion suppression failures in humans, and may offer a functional explanation for previous observations linking lack of sleep, changes in frontal activity and emotional dysregulation.

Disclosure: No significant relationships.

Keywords: EEG; emotion regulation; behavior; sleep

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Does insomnia increase the risk of suicide in patients with major depressive disorders? national inpatient sample analysis

A. Reddy^{1*}, Z. Mansuri², R. Vadukapuram³, M. Thootkur¹ and C. Trivedi⁴

¹Psychiatry, Virginia Tech Carilion School of Medicine, Roanoke, United States of America; ²Department Of Psychiatry, Boston Children's Hospital/Harvard Medical School, Boston, United States of America; ³Psychiatry, Icahn School of Medicine at Mount Sinai, New York, United States of America and ⁴Research, St Davids Healthcare, Austin, United States of America

*Corresponding author.

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Introduction: Insomnia is strongly associated with Major depressive disorders (MDD). There is strong evidence that it is one of the risk factor for suicide. Studies have shown the relationship of suicidal behavior in MDD patients with insomnia. However, it has not been evaluated in a large inpatient sample.