

controlled trials and six case reports studying the effects of NAC in patients suffering from trichotillomania (one performed in adults and the other one in infants) were included. Only the one performed in adults showed improvement when adding NAC to the treatment using the Massachusetts General Hospital, Hairpulling Scale (MGH-HPS). Four case reports and two randomized controlled trials included patients with excoriation disorder showed statistical differences in all of them. Three case reports and one randomized controlled trial in patients with onicotyloomania showed a difference that wasn't consistent after two months of treatment.

Conclusions: There are multiple case reports and several clinical trials supporting both the safety and efficacy of NAC in the treatment of body-focused repetitive behavior disorders. Based on these positive preliminary results and the absence of serious adverse effects, carrying out a therapeutic trial with NAC is a plausible option in the management of this pathology, especially in those in which other therapeutic options have not been effective. Further studies are needed to develop a treatment algorithm and elucidate the difference in the efficacy of NAC between children and adults with this disorder.

Disclosure of Interest: None Declared

EPP0113

Fusiform Gyrus is Related to Subclinical Social Anxiety in Healthy Individuals

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Introduction: Subclinical or subthreshold social anxiety (SSA) is associated with significant burden. Up to 20% of general population report subclinical social anxiety symptoms, which can change individual social, work functioning.

Objectives: However, neural mechanisms of SSA have not been fully investigated in healthy individual yet. This study aimed to examine the relationship between gray matter volumes (GMVs) and SSA.

Methods: We enrolled a total of 57 healthy individuals with SSA. The General Anxiety Disorder-7 (GAD-7), Beck Depression Inventory-II (BDI-II), Beck Anxiety Inventory (BAI), and Albany Panic and Phobia Scale (APPQ) were evaluated. Freesurfer was applied to investigate the relationship between SSA and GMVs. Multiple regression models with age, sex, and total intracranial volume as covariates were performed. Pearson correlation analyses also investigated the exploratory correlations between the GMVs of the SSA-related regions and other psychological characteristics among healthy individuals.

Results: Freesurfer voxel-wise correlational analyses showed a significant negative correlation between the SA scores of APPQ and gray matter volumes (GMVs) in the fusiform gyrus (FG). In addition, the GMVs in the FG were significantly negatively associated with the total GAD-7, BDI-II, BAI, and APPQ scores. Performance anxiety was significantly correlated with posterior cingulate gyrus, parahippocampal gyrus and fusiform gyrus.

Image:

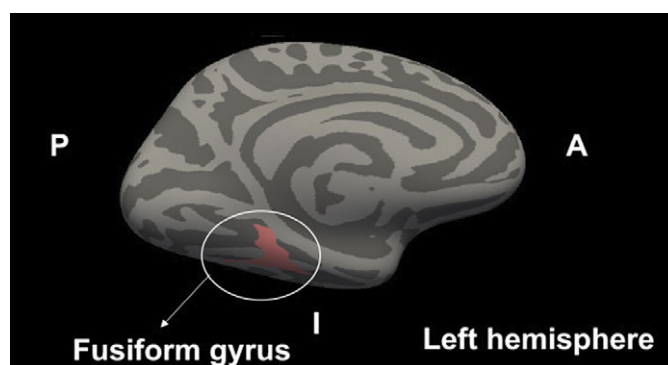


Fig.1 The significant negative correlation between the social anxiety scores and the GMVs in the cluster including left fusiform gyrus in healthy individuals (Monte Carlo simulations correction, cluster wise $p < 0.05$)

Conclusions: Our findings suggest that healthy individuals with SSA showed decreased GMVs in the FG and the GMVs of FG were associated with general anxiety and depression symptomatology.

Disclosure of Interest: None Declared

EPP0114

Setting the research agenda for medically not yet explained symptoms (MNYES): a priority-setting partnership of patients, caregivers and clinicians

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Introduction: This study establishes research priorities for Medically Not Yet Explained Symptoms (MNYES). A significant number of patients suffer from these symptoms, also known as MUS, that are likely to cause work disability and impact on quality of life. Research into MNYES in general has been poorly funded over the years, has been primarily researcher-led, and was sometimes controversial.

Objectives: To identify research priorities from the perspective of patients, caregivers and clinicians, following the James Lind Alliance (JLA) priority setting partnership (PSP) method.

Methods: The PSP Steering Group termed these symptoms Medically Not Yet Explained Symptoms (MNYES). This was an operational definition not intended to add to or replace other definitions already in use, that was constructed to embrace the views of all stakeholders. The nomenclature MNYES was chosen to indicate our incomplete understanding of these conditions. This could pertain to biological, psychological and social factors, as well as