diagnosis (p < 0.001) and between the tendency to compare themselves with people online and BDD diagnosis (p = 0.001). However, no statistically significant differences were found in the BDDpositive and negative groups concerning gender, the number of social media applications used, or time spent on social media.

Conclusions: There is a need to educate the public about the risk of BDD, especially the more susceptible age, and promote safe social networking. Counseling about the harmful effects of social media could be helpful. This is the first study of its kind done on the Pakistani population and one of the few studies that exist on this topic worldwide. Hence, to reach a conclusive decision, there is a dire need to carry out similar investigations with larger sample sizes and on populations that have yet not been studied.

Disclosure of Interest: None Declared

EPP0202

Biomarkers and clinical predictors of long-term course in obsessive compulsive disorder: A prospective cohort study

S. López-Rodriguez¹*, P. Alonso Ortega¹, C. Segalàs Cosi¹, E. Real Barrero¹, S. Bertolín Triquell¹, C. Soriano Mas¹, Á. Carracedo Alvarez² and J. M. Menchón Magriña¹

¹Obsessive-Compulsive Disorder (OCD) Division, Psychiatry Department, Bellvitge University Hospital, Barcelona and ²Medicina Legal y Forense, Universidad de Santiago de Compostela, Santiago de Compostela, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.533

Introduction: The purpose of the research project is to analyze the long-term evolution of obsessive-compulsive disorder (OCD) from of a study of a cohort of patients prospectively followed over a period ranging from 5 to 20 years, treated for according to therapeutic guidelines mediating serotonin reuptake inhibitors (IRS) and drug enhancers (antipsychotics) and cognitive behavioral therapy and evaluated in a standardized manner.

Objectives: To assess the long-term course of Obsessive-Compulsive Disorder (OCD) in a cohort of patients treated according to current clinical guidelines; to analyse possible prognostic factors associated with the long-term course of the disorder including clinical and sociodemographic variables, as well as genetic and neuroimaging biomarkers, and their interaction, and finally to study neuroanatomical and functional cerebral connectivity changes after 15 years of treatment in a subsample of patients.

Methods: Prospective, descriptive, and observational study of a cohort of OCD patients, receiving treatment at the Department of Psychiatry of Hospital de Bellvitge since 1998, according to a standardized protocol. Follow-up period ranges from 5 (n=423), to 10 (n= 247) and 15 years (123). Baseline clinical and sociodemographic assessment, long-term evolution and information on treatments provided are available for the whole sample. Data on whole exome sequencing is available for 300 of the patients included in the cohort and baseline structural neuroimaging and cerebral functional connectivity has been analysed in 168 subjects. To expand the analysis of genetic biomarkers, we propose the study of de novo variants through exome analysis of 50 trios (patient and both parents) selected among those subjects that have reached 15 years

of follow-up (25 trios with patients within the "long-term remission" group and 25 trios with patients with chronic OCD). De novo variants detected in the trio analysis will be replicated in the rest of the sample. A structural and resting state MRI will be obtained in a subsample of 100 patients recruited among those who have completed a minimum follow-up period of 15 years, to assess cerebral changes associated with the long-term course of the disorder.

Results: in the current moment the recruitment period of the study has ended and all the data is being statistically analysed in order to provide solid results in a short period of time.

Conclusions: The identification of those factors associated with an increased risk of chronic disease is an element essential to offer personalized treatment to our patients and improve their prognosis, emphasizing the intensive use of those therapeutic strategies for which we can predict a better response and modifying to the extent of, if possible, environmental factors or factors of access to treatment that contribute to perpetuate obsessive symptoms.

Disclosure of Interest: None Declared

EPP0203

Prevalence and associated factors of obsessivecompulsive disorder among the general population of Latvia

V. Vinogradova^{1*}, A. Kivite-Urtane^{2,3}, J. Vrublevska^{1,3} and E. Rancans¹

¹Department of Psychiatry and Narcology; ²Department of Public Health and Epidemiology and ³Institute of Public Health, Riga Stradins University, Riga, Latvia *Corresponding author.

doi: 10.1192/j.eurpsy.2023.534

Introduction: Obsessive-compulsive disorder (OCD) is one of the most severe and potentially disabling disorders among all anxiety disorders (Hendriks *et al.* J Affect Disord 2014; 166:227-33). There is no available information about the prevalence of OCD in the general population of Latvia.

Objectives: The aim of our study was to assess the one-month prevalence of OCD in the general population of Latvia and determine the associated factors.

Methods: The study was conducted on a representative sample of the Latvian adult population (n=2687), selected using a stratified random sampling method. Computer assisted face-to-face interviews were carried out between November 2019 and March 2020 in the households of the respondents. The OCD, and possible comorbid diagnoses, were assessed using the MINI International Neuropsychiatric Interview (M.I.N.I.). Anxiety symptoms were assessed with 7-item Generalized Anxiety Disorder (GAD-7) scale: a score of ≥5 indicated the presence of at least mild symptoms of anxiety. Patient-Health Questionnaire-9 (PHQ-9) was used for assessing comorbid depressive symptoms and a score of ≥10 indicated the presence of clinically relevant depressive symptoms. Descriptive statistics and binary logistic regression were applied.

Results: In total 1238 males (46.1%) and 1449 females (53.9%) were recruited. Detected one-month prevalence of OCD was 0.6% (n=16). After adjustment by all analysed factors (n=13) simultaneously, the odds ratio of having OCD adjusted for confounders (aOR) was higher in respondents younger than 44 y.o (vs. >44, aOR 14.2, p=0.007): 81.3% of all respondents with diagnosed OCD were

younger than 44 y.o.; The odds were statistically significantly higher in respondents with diagnosed severe anxiety (vs. no anxiety, aOR 26.0, p<0.001), alcohol use disorder (vs. no disorder, aOR 7.9, p=0.004) and suicidal behaviour disorder (vs. no suicidality, aOR 5.3, p=0.01).

Conclusions: One-month prevalence of OCD in Latvian general adult population is 0.6%. Young age, diagnosed severe anxiety, suicidal behaviour and alcohol use disorder are significantly associated with the OCD.

Disclosure of Interest: None Declared

EPP0204

Bipolar and obsessive-compulsive disorders psychopathological intersection: An exploratory study

Y. A. Ferrao^{*}, M. Bertoluci, L. S. Boff, H. Beckhauser, I. Ghiorzi and G. Langa

Clinical Neurosciences, Porto Alegre Health Sciences Federal University (UCSPA), Porto Alegre, Brazil *Corresponding author.

doi: 10.1192/j.eurpsy.2023.535

Introduction: Bipolar Mood Disorder (BD) and Obsessive-Compulsive Disorder (OCD) are psychiatric conditions that frequently co-occur and express a challenging phenomenology for treatment and diagnosis, since obsessive-compulsive symptoms tend to fluctuate according to mood phases of BD patients. Understanding the shared psychopathology of this comorbidity has relevant implications for the treatment of these patients, and the hypothesis that BD and OCD would have a shared neurobiology is currently being discussed. Most studies of this comorbidity have examined differences between BD and BD/OCD patients or between OCD and BD/OCD patients. This study aimed to analyze in detail the clinical, phenomenological and psychopathological characteristics of patients with BD, OCD, and BD/OCD.

Objectives: This study aimed to analyze in detail the clinical, phenomenological andpsychopathological characteristics of patients with BD, OCD, and BD/OCD.

Methods: This study consisted of a sample of 21 BD patients, 21 OCD patients and 21 BD/OCD patients who underwent the application of the MINI, Y-BOCS, DY-BOCS, HAM-D, HAM-A, YMRS, of Sensory Phenomena (USP), as well as questions about sociodemographic characteristics, personal and family psychiatric history. We performed the YBOCS scale asking patients with BD to respond 3 times the scale: in the current time (during euthimya) and retrospectively for previous manic or depressive episodes.

Results: BD/OCD group had a higher rate of having stopped working due to comorbid disorders, a higher history of family suicide attempt and completed family suicide, a higher prevalence of substance use disorder in the family, and a higher prevalence of hoarding symptoms. In the BD sample, 47,6% had obsessive-compulsive symptoms. The presence of OCD conferred a higher prevalence of sensory phenomena. Patients reported a 19% (median, 0.19, range -1.00 to 1.88) worsening of OCD during depression, and a 9.5% worsening (median, 0.095, range of -1.00 to 1.36) during the manic phase.

Conclusions: The results suggest that BD/OCD patients have greater loss of functionality, higher rates of hoarding symptoms, family history with greater suicidality and higher rates of substance

use disorder (SUD) and worsening of OCD in both mania and depression. The psychopathological findings of this study allow us to conclude that BD/OCD patients have higher morbidity.

LIMITATIONS: Small size sample and possible recall bias in the interview, as questions wereasked retrospectively.

Disclosure of Interest: None Declared

Old Age Psychiatry 02

EPP0205

Prevalence of neuropsychiatric disorders in internally displaced persons with dementia during wartime in Ukraine

M. Dzis* and L. Rakhman

Psychiatry, Psychology and Sexology, Lviv National Medical University after Danylo Halyckyi, Lviv, Ukraine *Corresponding author. doi: 10.1192/j.eurpsy.2023.536

Introduction: During the second wave of Russia-Ukraine war, around 8 million were internally displaced. Negative mental health impact of the war cannot be underestimate. Among internally displaced persons (IDPs), particularly vulnerable category is people with neurocognitive deficits. Stress associated with displacement may cause a change not only in cognitive functions, but also affect the onset or evaluation of behavioral and psychological symptoms. **Objectives:** to study the prevalence of neuropsychiatric disorders in hospitalized patients with dementia, who were internally displaced and to compare with general population frequency.

Methods: 64 IDPs with dementia (moderate and severe neurocognitive deficits) who were examined during March-September 2022. Cases of newly arrived persons were taken into account, after 1 to 30 days had passed since their relocation. The diagnosis was verified based on the ICD-10 criteria (F00-F01). The degree of neurocognitive deficit was determined using the MMSE and MoCA tests. Affective pathology was studied using the HAM-D, HAM-A, PHQ-9, AES scales. Psychotic symptoms and behavioral disorders were studied based on clinical examination and medical records. The study was conducted in Lviv Regional Psychiatric Hospital. **Results:** among the examined patients, 60 (94% of all examined)

had neuropsychiatric disorders. Among this sample, neuropsychiatric symptoms (an isolated symptom or a combination of two or more symptoms) occurred with the following frequency: apathy 16 (26.7%), anxiety49 (81.7%), depressive symptoms 32 (53.3%), agitation and aggression 41 (68.3%), hallucinatory symptoms 8 (13.3%), delusional disorders 34 (56.7%), wandering and disorientation 18 (30%), refusal of food and medicine 12 (20%) **Image:**

