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Introduction: Corticosteroids may induce psychiatric symptoms (agitation, fear, hypomania, insomnia, irritability, labile mood, pressured speech and restlessness) with incidence rates ranging from 1,8% to 57%. We present a case of corticosteroid-induced mania and psychosis.

Objectives: Non-systematic review on corticosteroid therapy induced psychiatric symptoms. Analysis and comparison of a patient's case with the existing literature.

Methods: Case report and a non-systematic review through databases as Pubmed, UpToDate, Medscape, between 2000 and 2020.

Results: We present a female 70 year-old patient without psychiatric background, diagnosed with Rhizomelic Pseudopolyarthritis, who started treatment with prednisone 20 mg. During the third month of treatment the patient started progressively worse behavior changes (such as destruction of the neighbor's property), developed persecutory delusions, decreased sleep and increased energy. The patient was committed to our psychiatric ward and started on diazepam 10 mg and olanzapine 15 mg per day. Despite introduction of antipsychotics, which has evidence for mood stabilization, the patient maintained the symptoms, so it was necessary to gradually reduce corticosteroids until symptomatic control.

Conclusions: Psychosis (24%), hypomania and mania (35%), are the most common psychiatric reactions to corticosteroid therapy. Several studies show that even a low dosage may induce psychiatric disturbances, most frequently during the first two weeks of treatment. However, as reported in this case, symptoms may occur at any time. Thus, a multidisciplinary team, as well as training of professionals from different specialties, such as psychiatry, rheumatology and endocrinology, are needed, since these syndromes may be confused with pure psychiatric conditions and consequently delay treatment and compromise prognosis.

Disclosure: No significant relationships.

Keywords: corticosteroid; mania; psychosis; prevention

EPV0464

Internet-related problems and learning motivation of the students of medical university

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Introduction: Nowadays the cyberspace penetrates all the spheres of our lives: work, leisure and learning activity. However, uncontrolled presence in the virtual reality can form Internet-addictive behavior. Young people seem to be in increased risk of Internet-related problems.

Objectives: The research aim is to study the motivational sphere of the students with different level of Internet dependency.

Methods: The research methods are: Chen Internet Addiction Scale (CIAS), Internet Perception Inventory, Learning Motivation

Diagnostics Inventory, Test of Motivation of Success or Fear of the Failure. The sample consists of 37 students of the medical university in the age from 21 to 24 years. According to the results of the CIAS 3 groups have been marked out: Group 1 - with the highest level of Internet-related problems, Group 2 - the risk group of forming the Internet addiction, Group 3 - students who have not demonstrated proneness to Internet-addictive behavior.

Results: The motivational sphere of the students with a low risk of Internet addiction seem to be more differentiated comparing with the one of the rest students. The motives of creative self-realization; communicative, social and learning motives have been demonstrated. However, we have not found a significant difference between the groups in motivation for success. The motives of professional self-realization are equally important for all the research participants.

Conclusions: The obtained data can be implemented when designing Internet addiction prevention programs. We assume that including the motivational component into such programs can make them more effective.

Disclosure: No significant relationships.

Keywords: Internet addiction; motivational sphere

EPV0466

A systematic review: Investigation of effectiveness of the web based online interventions to manage and reduce stress of university students

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Introduction: The literature shows a high prevalence of psychopathological problems, anxiety and depression among university students because of academic expectations, uncertain future plans, staying away from their family, economic issues and peer relationships. Although these problems show high prevalence among university students, providing them a professional care is limited so most of problems remain untreated. Nowadays the students use digital technologies commonly therefore web based and computer delivered interventions may be useful for them to improve resilience and coping strategies.

Objectives: The intent of the study was to review systematically the impacts of web based and computer delivered interventions regarding stress management among university students.

Methods: Several databases were searched with using key words such as university students, online interventions, web based interventions and stress management. Randomised controlled studies were reviewed.

Results: We found 284 article with the key words. Only four of them met the including criterias. All results of reviewed articles show that web based online interventions have an impact to reduce depression, stress and anxiety level among students. According to the results students improved coping skills against stress after web based online sessions.

Conclusions: The findings show that web based and computer delivered interventions can be effective to improve resilience and reduce students' depression, anxiety and stress symptoms when compared non-interactive and inactive controls. In addition online interventions regarding stress management may provide us to reach out large group of university students.

Disclosure: No significant relationships.

Keywords: stress management; university students; online interventions; web based interventions

EPV0469

5-years follow-up of patients with the clinical high-risk state for psychosis

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Introduction: The identification of the psychosis high-risk state in help-seeking patients with depressive symptoms offers the possibility of detection and intervention at the early stages of schizophrenia.

Objectives: Estimating the 5-year follow-up rate of the manifestation of psychosis and levels of functioning in patients with the clinical high-risk state and depressive symptoms.

Methods: 81 inpatients (average age 19.6 years) with depressive symptoms and attenuated psychosis (60 patients with APS and 21 patients with BLIPS). Average duration of inpatient treatment was 56.3 days, antidepressant therapy (mean dosage equivalent to fluoxetine 43.1 mg/day) and antipsychotic therapy (mean dosage equivalent to chlorpromazine 408.9 mg/day) were conducted. All patients were followed up after discharge at least during 5 years (average follow-up 7.1 years). Levels of functioning were assessed on the PSP scale.

Results: The manifestation of psychosis was identified in 21.0% (17 patients) (on average in the third year of follow-up), complete symptomatic and functional remission was established in 11.1% (9 patients) (PSP 100-81), complete symptomatic and incomplete functional remission was established in 27.2% (22 patients) (PSP 80-61). Incomplete symptomatic and incomplete functional remission – in 24.7% (20 patients) (PSP 60-41) and 13.5% (11 patients) (PSP<40).

Conclusions: The combination of antidepressants and antipsychotics therapy in patients with the clinical high-risk state for psychosis reduced the risk of psychosis manifestation but did not significantly affect the level of outcome compared to other studies.

Disclosure: No significant relationships.

Keywords: high risk psychosis; early intervention; youth depression; attenuated positive symptoms

EPV0470

Indicators of psychomotor development of premature infants by perinatal CNS lesion

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Introduction: The birth premature babies with hypoxic-ischemic damage to the neutral system with the subsequent development of hypoxic encephalopathy (HIE). Monitoring of the mental development and neurological status of such prematurely born children is carried out taking into account the corrected age and traditional scales.

Objectives: To compare indicators of psychomotor development in preterm infants (gestational age < 32 weeks) with and without hypoxic-ischemic encephalopathy.

Methods: A prospective study was carried out in the neurological department. The study included data from infants with a gestational age of < 32 weeks of gestation. Scale score immediately after birth and at corrected ages in the first, third and sixth months of life (data analysis according to Griffiths Scales).

Results: Data from 95 newborns were eligible for conclusion. Of these, 67 children took part in the study, 32,8% of them were diagnosed with hypoxic-ischemic encephalopathy. In newborns with HIE gestational age at birth was less so they received parenteral nutrition for a longer time, the body weight gained during the hospital stay was less, they needed more time to switch to enteral nutrition. And only at the 3rd (80% of children) and 6th months of life, there were no statistically significant differences in psychomotor development between groups with and without hypoxic-ischemic encephalopathy.

Conclusions: In this study, it was shown that in premature infants with hypoxic-ischemic encephalopathy, normal indicators of psychomotor development and neurological status were restored at the corrected age only by 6 months of age.

Disclosure: No significant relationships.

Keywords: premature infants; hypoxic-ischemic damage; psychomotor development

EPV0471

An unbalanced time-perspective profile in cardiac surgery patients as a risk factor for depression

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Introduction: Depression is one of common comorbid states that accompany cardiovascular diseases. Risk of co-morbidity can rise when patients have to undergo heart surgery, which is an additional stress-factor.

Objectives: To specify psychological correlations between depressive manifestations in cardiac surgery patients based on the analysis of their time perspective profile.

Methods: Using the Zimbardo Time Perspective Inventory, we examined 60 cardiac surgery inpatients (80% male, mean age 58.25±10.55). We calculated the statistical estimation of the received data based on the comparison with the norm and the correlation analysis.