Introduction: Bipolar disorder is a complex psychiatric condition marked by severe mood swings, including prolonged depressive episodes that constitute approximately 50% of the illness duration. While there is substantial evidence supporting interventions for manic and hypomanic episodes, therapeutic options for bipolar depression remain insufficient and often ineffective. Accelerated repetitive transcranial magnetic stimulation (arTMS) has emerged as a promising treatment modality with the potential to address these gaps. arTMS offers rapid antidepressant effects comparable to traditional repetitive transcranial magnetic stimulation (rTMS) protocols while maintaining a favorable safety and tolerability profile.
Objectives: This prospective, open-label, multicenter study investigates the efficacy and safety of arTMS in treating bipolar II disorder during depressive phases.
Methods: The study enrolled 20 patients who underwent a five-day, four-times-daily arTMS protocol targeting the left dorsolateral prefrontal cortex (DLPFC). The primary outcome measure was the Montgomery–Åsberg Depression Rating Scale (MADRS), assessed at baseline, immediately post-treatment, and at one- and three-month follow-ups. Secondary outcomes included safety and tolerability, with a focus on the risk of manic or hypomanic switches as measured by the Young Mania Rating Scale (YMRS).
Results: Results indicated a significant reduction in MADRS scores from baseline to immediately post-treatment, with a mean difference of -9.80 (Cohen's d=1.065, p<0.001). Continued improvements were observed at one month (-15.60, d=1.695, p<0.001) and three months (-19.70, d=2.140, p<0.001), with response rates increasing from 15% immediately after treatment to 60% at three months, and remission rates rising from 5% to 55% over the same period. Importantly, arTMS did not result in any significant increase in YMRS scores, indicating no emergence of manic symptoms, and no hypomanic switches were reported.
Conclusions: The findings underscore the rapid onset and sustained effectiveness of arTMS for bipolar depression, with improvements observed immediately after treatment and continuing over the subsequent months. The progressive rise in response and remission rates suggests that therapeutic benefits may become more pronounced over time, highlighting the importance of considering delayed treatment responses. Moreover, the lack of adverse effects on mood polarity supports arTMS as a safer alternative compared to traditional pharmacological treatments, which are often associated with a risk of manic episodes. Future research should include larger, randomized, sham-controlled trials to validate these findings and further explore the neurobiological mechanisms underlying arTMS's rapid antidepressant effects.

Disclosure of Interest: None Declared

EPV0205

On Being and Having: A Qualitative Study of Self-Perceptions in Bipolar Disorder

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Introduction: Bipolar disorder (BD) is a chronic and often severe mental illness. Yet despite the well-documented complexities in its diagnosis and treatment, little research has been dedicated to understanding the complex inner landscape experienced by those living with BD. Even as qualitative research has explored the lived experience of BD across a variety of perspectives, i.e., what BD *looks like*, there is a lack of research exploring what BD *means* to those living with the condition.
Objectives: We aimed to understand how people with BD perceive their condition, construct the meaning of their illness, and view BD in relation to their sense of self.
Methods: We conducted individual, semi-structured interviews with 20 adults with clinically stable BD. We coded the transcripts according to the principles of thematic analysis and analyzed the data using an interpretative phenomenological analysis approach.
Results: We identified three overarching domains: (1) *Benefit or burden:* a dialectic through which participants weighed the valence of their illness over time; (2) *Self or other*: the internal or external locus through which they experienced BD; and (3) *From ineffability to meaning making:* the process of naming, understanding, and incorporating BD into their life's whole. Within each domain, themes and subthemes outline nuanced and often conflicting perspectives of participants' illness experiences.
Conclusions: Our work provides a framework of three domains central to the inner reality of lived bipolar experience. Thoughtful understanding of patients' experiences, perspectives, and desires within these three domains may aid clinicians and loved ones alike in more sensitively and effectively addressing the unique individual needs of those living with BD. By exploring patients' perspectives in each of the three domains we identified, those caring for people with BD may be better positioned to help identify the inner work and practical interventions needed to achieve a rich, meaningful life with BD.

Disclosure of Interest: None Declared

EPV0206

Seasonality in bipolar disorder, analysis of an inpatient unit

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Introduction: Bipolar disorder is a chronic mental health condition characterized by alternating periods of mania, depression, and mixed states. The timing and recurrence of these mood episodes may be influenced by external factors, including seasonal variations. Previous research has highlighted potential seasonal patterns in the onset of manic episodes, with environmental factors such as changes in light exposure, temperature, and circadian rhythms playing a role. Comprehending these temporal patterns is paramount, as they provide critical insights into the underlying mechanisms of mood dysregulation and can inform the development of more targeted and effective clinical interventions for individuals with bipolar disorder.
Objectives: The primary objective of this study is to determine whether manic and mixed episodes in bipolar disorder show a

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