O023

Personal autonomy and hopelessness are associated with antidepressant drugs prescription in currently euthymic bipolar patients

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Introduction: The patterns and clinical correlates related to antidepressant drugs (ADs) prescription for BD remain poorly understood.
Objectives: This study aimed to compare socio-demographic and clinical features of BD patients treated vs. not treated with ADs.
Methods: The sample consists of 287 currently euthymic bipolar patients. Among participants (mean age=51.9±15.02), 157 (40.1%) were receiving ADs.
Results: Based on the main findings, subjects given ADs were older and more frequently retired than those without receiving ADs. Moreover, patients given ADs were more likely to have had a first major depressive episode and present with psychotic symptoms at illness onset. Lifetime substance abuse/dependence history was less frequently reported among patients given ADs. Furthermore, ADs given patients have a higher number of affective episodes, and longer duration of their illness. Additionally, subjects treated with ADs reported higher hopelessness levels, and lower positive reinterpretations than those who were not treated with ADs. Factors associated with ADs-use by multivariate modeling were reduced personal autonomy (OR=.070), and hopelessness levels (OR=1.391).
Conclusions: These results may help clinicians to better understand the clinical correlates of BD subtypes and improve their differential management. Additional studies are needed to replicate these findings, and facilitate the differential trajectories of BD patients based on socio-demographic/clinical profile.

Disclosure: No significant relationships.
Keywords: Coping Strategies; Hopelessness; antidepressant medications; bipolar disorder

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Cognitive function and metabolic syndrome in unipolar and bipolar depression: A pilot study

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Introduction: Cognitive function is impaired in depressive disorders. Among several factors implicated in regulation of the cognitive function, metabolic syndrome has been showed have a pivotal role cognitive functioning in healthy controls. However, the role of metabolic syndrome in regulating the cognitive functioning of subjects affected by depressive disorders is little studied.
Objectives: To investigate the effect of metabolic syndrome in regulation of cognition in unipolar and bipolar depression.
Methods: One-hundred-sixty-five people affected by a depressive disorder (unipolar depression, UP; bipolar depression, BP) were enrolled at the Psychiatric and Clinic Psychology Unit of the University of Rome Tor Vergata, Rome, Italy. A group of healthy controls (HC) matched for agender and age was enrolled. The cognitive functions were evaluated with a computerized tool, THINC-it.
Results: UP and BP had lower performances in THINC-it cognitive domains than HC. Metabolic syndrome is a negative, independent predictor of low performance in the THINC-it cognitive domains of people with depressive disorders.
Conclusions: Our findings confirm that metabolic syndrome has a prominent role in determining the cognitive efficiency in depressive disorders, independently by the presence of a unipolar or bipolar depressive disorder. Metabolic syndrome has to be considered a major factor that should be considered in the treatment strategies of cognitive functioning improvement of people affected by depressive disorders.

Disclosure: No significant relationships.
Keywords: Metabolic syndrome; cognitive function; bipolar disorder; major depressive disorder

O023

Bipolar mania with psychosis vs without psychosis: A clinical characterization with indirect measures of severity

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Introduction: The presence of psychotic symptoms is highest during acute episodes of bipolar mania. There is no evidence base regarding the implications of psychosis in the prognosis of bipolar disorder, despite common assumption that their occurrence reflects greater disease severity.
Objectives: We aim to compare sociodemographic and clinical characteristics of inpatients admitted for bipolar mania with and without psychotic features.
Methods: Retrospective observational study of inpatients admitted between January 1st 2017 and 31 October 2020 in a psychiatry inpatient unit of a tertiary hospital. Descriptive analysis of the results was performed using the SPSS software, version 26.0.
Results: Between 2017 and October 2020 there were 103 admissions due to mania bipolar I disorder, 53.4% (n=55) with psychotic symptoms. When compared with mania without psychosis, psychotic mania was associated to male gender (71.1% to 39.7%; $c^2(1, N = 103) = 10,06$; $p = 0.02$) and younger age ($t(103) = -2.43$; $p = 0.017$). The proportion of compulsory admissions and average length of stay were similar between mania with psychosis and

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