EPP548

Course and severity of bipolar disorder determining TGF-beta

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Introduction: Bipolar Disorder (BD) is a severe and chronic psychiatric condition, with complicated course and substantially reduce psychosocial functioning. Alterations in immune response are considered to be one of the major factors underlying the etiopathogenesis of BD, causing alterations in neurotransmitter systems, neuroendocrine systems, neurotrophic factors, and producing oxidative stress. Inflammatory cytokines have potential value for the clinical diagnosis and prognosis of BD.

Objectives: The primary aim of the study was to assess the effect of disease course and clinical-characteristics on alterations of transforming growth factor-beta (TGF-beta), in BD.

Methods: This cross-sectional study included 82 patients with BD in remission. Multivariate linear regression with TGF-beta value as an outcome, and duration of illness, number of hospitalizations, residual symptoms estimated as Brief Psychiatric Rating Scale (BPRS) score, gender, and age, was used to produce the model.

Results: The explored linear regression model was significant, explaining 39.4% of the variance ($p<0.001$). Higher TGF-beta was predicted by less previous hospitalizations ($p<0.001$) and lower BPRS score (0.034), while longer duration of illness was almost significant predictor ($p=0.054$). Age and gender showed no predictive effect in the model.

Conclusions: The study points out to the better course of BD characterized by less episodes and less residual symptoms in determining the TGF-beta levels, potentially creating a more favorable immunological state. The importance of neuroprotective and neurodegenerative balance of immune mediators, their interplay and relation to chronicity and severity of BD should be further explored.

Disclosure of Interest: None Declared

EPP549

The Evolution and Impact of Mixed Mood States: From Ancient Observations to Modern Understanding

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Introduction: Mood disorders with mixed features, characterized by the concurrent presence of manic and depressive symptoms, represent a complex and significant area in psychiatric research. Historically, the recognition of such mixed states traces back to ancient Greek scholars, with evolving understanding through the 19th century. This evolution reflects substantial contributions from early thinkers to modern psychiatric frameworks.

Objectives:

1. To trace the historical development of the concept of mixed mood states from ancient Greece to the 19th century.
2. To analyze the contributions of key figures such as Areteo of Cappadocia, Wilhelm Griesinger, Jean-Pierre Falret, Emil Kraepelin, and Wilhelm Weygandt in shaping the understanding of mixed states.
3. To evaluate the impact of Kraepelin's and Weygandt's work on contemporary classifications of mood disorders.

Methods: A historical review of primary and secondary sources, including classical texts and psychiatric literature, was conducted. The analysis focused on the contributions of significant historical figures, examining their theories and classifications of mood disorders. Key publications, such as Kraepelin's treatises and Weygandt's monographs, were scrutinized to assess their influence on modern psychiatric nomenclature.

Results: The study highlights the foundational observations of mixed mood states by ancient Greek scholars, particularly Areteo, who first proposed that mania and melancholia were facets of the same condition. The 19th-century revival of interest in these states saw important contributions from Griesinger and Falret, with Kraepelin's systematic framework in his 1899 treatise integrating mixed states into a unified concept of manic-depressive insanity. Weygandt's 1899 monograph further refined the understanding of mixed states, reflecting a collaborative intellectual effort with Kraepelin.

Conclusions: The historical evolution of mixed mood states demonstrates a significant advancement in psychiatric theory. Kraepelin's comprehensive framework, supported by Weygandt's detailed analysis, laid the groundwork for contemporary classifications of mood disorders. Recognizing the collaborative nature of these developments underscores the importance of shared intellectual contributions in the advancement of psychiatric science.

Disclosure of Interest: None Declared

EPP550

The Syndrome of Irreversible Lithium-Effectuated Neurotoxicity: A Report of Two Cases

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Introduction: Lithium is a widely used treatment for mood disorders, particularly bipolar disorder, but its narrow therapeutic range often leads to toxicity. A major complication is lithium-induced neurotoxicity, which is generally reversible with dose adjustment or discontinuation. However, symptoms persisting beyond two months after cessation are deemed irreversible and may result in permanent neurological damage(Verdoux *et al.* Encephale 1991;17:221-4).

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