	Baseline Men	1-year follow-up Women	Total	Men	Women	Total
Affective psychosis	17 (14.5)	9 (12.7)	26 (13.8)	24 (20.5)	25 (35.2)	49 (26.1)
Non-affective psychosis	100 (85.5)	62 (87.3)	162 (86.2)	93 (79.5)	46 (64.8)	139 (73.9)

Image:

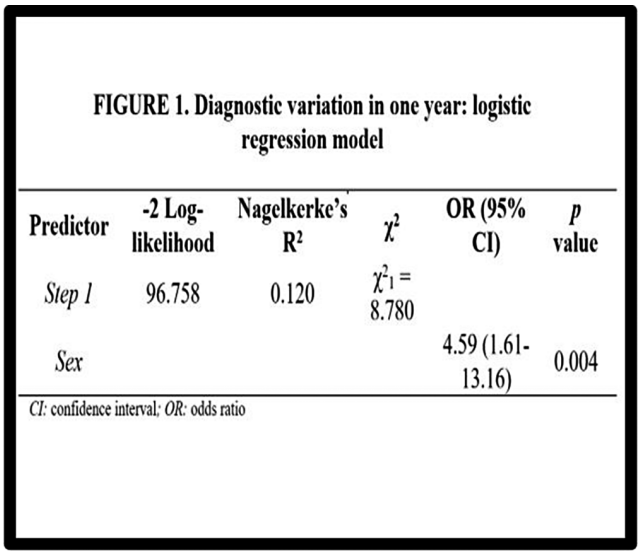


FIGURE 1. Diagnostic variation in one year: logistic regression model

Predictor	-2 Log-likelihood	Nagelkerke's R^2	χ^2	OR (95% CI)	*p* value
Step 1	96.758	0.120	$\chi^2_1 = 8.780$		
Sex				4.59 (1.61-13.16)	0.004

CI: confidence interval; *OR:* odds ratio

Conclusions: Sex has proven to be the main predictor of switching initial diagnosis of FEP.

Disclosure of Interest: None Declared

EPV0220

Impulsivity: A Dimensional Perspective in PD and ED. Comparison of Results in a Case-Control Study.

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Introduction: Personality Disorders (PD) - specifically Borderline Personality Disorder (BPD), and certain Eating Disorders (ED) share common clinical features. One of these features is impulsivity, studied individually in each diagnostic group, and scarcely used to encompass specific profiles of these patients.
Understanding the common clinical variables of this patient population would facilitate therapeutic efforts and enable greater precision regarding the prognosis of these patients.
Objectives: This study aims to study impulsivity in a group collectively formed by BPD and ED, compared to a control group, in contrast to the individualized study approach typically conducted in the literature.
Methods: A cross-sectional descriptive study is conducted to assess impulsivity as a common diagnostic variable in a group of PD and ED in comparison with a healthy control group. The sample was collected between 2016 and 2019 at the Hospital Clínico San Carlos, totaling 108 subjects.
Results: A statistically significant difference is observed ($p<0.005$ in all scales) in total impulsivity, cognitive impulsivity, motor impulsivity, and unplanned impulsivity in the cases group comprising patients diagnosed with PD and ED, compared to the control group from the general population.
Conclusions: Impulsivity is closely related to the concept of borderline personality disorder. This analysis also includes eating disorders, with the difference from the control group still statistically significant.
The presence of common clinical variables in these groups (PD and ED) may have clinical and therapeutic implications that differ from those pursued thus far. This allows moving away from the categorical model and understanding these disorders from a more enriching and advanced dimensional perspective."

Disclosure of Interest: None Declared

EPV0221

Non-Standard Diagnostic Assessment reliability in psychiatry: A study in a Brazilian outpatient setting using Kappa

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Introduction: The use of Structured Diagnostic Assessments (SDAs) is a solution for unreliability in psychiatry and the gold standard for diagnosis. However, except for studies between the 50s and 70s, reliability without the use of Non-SDAs (NSDA) is seldom tested, especially in non-Western, Educated, Industrialized, Rich, and Democratic (WEIRD) countries.
Objectives: We aim to measure reliability between examiners with NSDAs for psychiatric disorders.
Methods: We compared diagnostic agreement after clinician change, in an outpatient academic setting. We used inter-rater Kappa measuring 8 diagnostic groups: Depression (DD: F32, F33), Anxiety Related Disorders (ARD: F40–F49, F50–F59), Personality Disorders (PD: F60–F69), Bipolar Disorder (BD: F30, F31, F34.0, F38.1), Organic Mental Disorders (Org: F00–F09), Neurodevelopment Disorders (ND: F70–F99) and Schizophrenia Spectrum Disorders (SE: F20–F29) (Check table 1 about diagnosis hyerarchy and observed frequency in sample). Cohen's Kappa measured agreement between groups, and Baphkar's test assessed if any diagnostic group have a higher tendency to change after a new diagnostic assessment. This research was approved by IPUB's ethical committee, registered under the CAAE33603220.1.0000.5263, and the UTN-U1111-1260-1212.
Results: We analyzed 739 reevaluation pairs, from 99 subjects who attended IPUB's outpatient clinic. Overall inter-rater Kappa was moderate, and none of the groups had a different tendency to change (Check table 2 for diagnostic change distribution). Our