EPV0090

Features of the course of affective diseases in hyperthymic persons

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doi: 10.1192/j.eurpsy.2023.1447

Introduction: Hyperthymia was studied by many eminent psychiatrists considering it mainly within the framework of the subsyndromic course of affective disorders (Akiskal H.S., Angst J., Benazzi F.). Statistical data on the prevalence of hyperthymic personalities are scarce, which is associated with rare requests for help and diagnosis of this condition within the framework of character traits. Given the above, the study of the psychopathological and dynamic features of hyperthymia seems to be very relevant, since previously hyperthymic characterological features were not always taken into account in the diagnosis of the disease, the selection of drugs and the prediction of remission.
Objectives: Determination of the clinical features of the course of an affective disease in patients with hyperthymic features.
Methods: The sample consisted of, 48 patients (39 women, 9 men) who were on inpatient or outpatient treatment at the clinic since 2019 to 2022. Patients were examined by clinical-psychopathological, clinical-anamnestic methods due to the presence of a phase affective state.
Results: The subjects were diagnosed with two diseases - bipolar affective disorder and cyclothymia. There were 2 variants of affective phases - affective-mixed and "double" mania. In bipolar disorder, there were anxiety-hypochondriacal depressions (10 patients, 38.5%), polymorphic depressions (4 patients, 15.4%), asthenic hypomania (5 patients, 19.2%), hypochondriacal manias (3 patients, 11. 5%), alternating states (4 patients, 15.4%), "double" manias (8 patients, 23.5%). In cyclothymia, anxiety-hypochondriac depression (8 patients, 57.1%), somatoform decompensation (2 patients, 14.3%) and asthenic hypomania (4 patients, 28.6%) were observed.
Conclusions: Thus, bipolar disorder was the most common among hyperthymic individuals. Anxiety-hypochondriacal depression prevailed in both nosologies. Manic and hypomanic states were most often observed in patients with bipolar disorder ("double" manias - exclusively in bipolar disorder).

Disclosure of Interest: None Declared

EPV0091

Insight, symptom severity and medication adherence in bipolar disorder

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doi: 10.1192/j.eurpsy.2023.1448

Introduction: Bipolar disorder is a mood disorder that requires adequate treatment, both acutely and for long-term prevention to avoid recurrence. A growing number of safe and effective medications, particularly thymoregulatory drugs and antipsychotics, can be used for the preventive and long-term treatment of bipolar disorder.
Insight, or awareness of the illness, has been little studied in bipolar disorder. It would seem that the presence of psychotic symptoms and manic polarity are linked to an alteration in clinical insight. The lack of insight could be linked to poor or non-adherence to treatment in psychiatric pathology including bipolar disorder.
Objectives: Our aim is to study the correlation between the level of insight, symptom severity, and medication adherence in patients with bipolar disorder and compare them to those in the literature in order to allow a better therapeutic compliance for patients.
Methods: It is a prospective descriptive study of a series of cases, carried out at the psychiatric hospital Ar-razi in Salé over a period of 4 months.
Our inclusion criteria are patients diagnosed with bipolar disorder according to DSM 5 criteria, aged over 18 years.
The data are collected during the psychiatric interview with the patient. Insight is assessed by the Beck Cognitive Insight Scale and the severity of the symptoms is assessed by the Clinical Global Impression.
Results: Ongoing
Conclusions: Ongoing

Disclosure of Interest: None Declared

EPV0092

Bioenergetic changes and mitochondrial dysfunction in mania versus euthymia in bipolar disorder type I

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doi: 10.1192/j.eurpsy.2023.1449

Introduction: Current evidence has hypothesized the involvement of mitochondrial dysfunction during the acute episodes of BD compared to symptomatic remission. So far, no studies have compared mitochondrial and bioenergetic functions both *in-vivo* (respiratory parameters) and *ex-vivo* (cellular respiration) in different phases of the disease in the same individuals.
Objectives: This multidisciplinary pilot study aims at assessing bioenergetic and mitochondrial intra-individual differences between manic and euthymic states.
Methods: Four patients with a manic episode admitted to our acute psychiatric ward were recruited. Bioenergetic parameters were measured at admission (T0) and after symptomatic remission (T1). At admission (T0) and before discharge (T1), HAMD and YMRS total scores were obtained. For the assessment of cellular respiration, polymorphonuclear cells were obtained by a Ficoll density gradient centrifugation procedure. To determine oxygen consumption (at T0 and T1), a million of living peripheral blood mononuclear cells (PBMC) were used. High-resolution respirometry was