

Methods: The study comprised 48 abstinent inpatients with AUD and 68 healthy control subjects. All participants completed a heart rate tracking task, serving as an objective physiological measure of IAc. In addition to the IAc task, several assessments were administered to the patient group, including the Alcohol Use Disorders Identification Test (AUDIT), the Penn Alcohol Craving Scale (PACS), the Temperament and Character Inventory (TCI), and the Toronto Alexithymia Scale (TAS-20). Patients were recruited for a 28-day abstinence-based inpatient treatment program, and all assessments were conducted during the final week of hospitalization at the Alcohol and Substance Addiction Treatment Center in Trakya University School of Medicine (Edirne, Türkiye).

Results: Patients' HBP scores (mean \pm standard deviation: 0.59 ± 0.21) were significantly lower than those of healthy control subjects (0.74 ± 0.15) ($t = -4.469$, $p < 0.001$). The patients' HBP scores showed significant negative correlations with AUDIT ($r = -0.312$, $p = 0.035$), PACS ($r = -0.361$, $p = 0.019$), and TAS-20 scores ($r = -0.406$, $p = 0.004$). Additionally, there was a significant positive correlation between patients' HBP scores and TCI self-directedness scores ($r = 0.371$, $p = 0.009$), and a near-significant correlation with TCI persistence scores ($r = 0.282$, $p = 0.052$). TCI novelty seeking, harm avoidance, reward dependence, cooperativeness, and self-transcendence scores did not significantly correlate with patients' HBP scores ($p > 0.05$).

Conclusions: Our findings may support the hypothesis that interoceptive processes play a role in AUD, and that certain traits linked to vulnerability to alcohol use are associated with decreased IAc.

Disclosure of Interest: None Declared

Bipolar Disorders

EPP0481

Factors influencing delays in the diagnosis and treatment of bipolar disorder in adolescents and young adults: A systematic scoping review.

A. Levit^{1*}, J.-J. Nunez^{1,2}, E. Morton^{1,3} and K. Keramatian^{1,2,4}

¹Department of Psychiatry, University of British Columbia; ²Mood Disorders Clinic, Djawad Movafighan Centre for Brain Health, Vancouver, Canada; ³School of Psychological Sciences, Monash University, Melbourne, Australia and ⁴Coastal Early Psychosis Intervention Program, North Vancouver, Canada

*Corresponding author.

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Introduction: Bipolar Disorder (BD) is a complex psychiatric condition that typically manifests during late adolescence and early adulthood. Over the past two decades, international studies have reported that BD often goes unrecognized and untreated for several years, which can lead to negative clinical and functional outcomes. However, the components of delay in the diagnosis and treatment of BD in adolescents and young adults and various factors influencing those components have not been systematically explored.

Objectives: To determine the known factors that contribute to delays in the treatment of BD in adolescents and young adults and identify current knowledge gaps.

Methods: A conceptual framework based on the *Model of Pathways to Treatment* by Scott and colleagues was used as a foundation for

our search and extraction strategy to ensure all components of delay and potential factors influencing each component are explored. We used the Preferred Reporting Items for Systematic Reviews and Meta-Analyses guideline (PRISMA-ScR) to systematically search the electronic databases of MEDLINE (OVID), EMBASE, PsycINFO and CINAHL for peer-reviewed original research articles published from January 01, 2000 through March 29, 2023. Inclusion was restricted to studies with quantitative or qualitative data on individuals diagnosed with bipolar spectrum disorders with symptomatic onset or study participation between the ages of 13-24. Grey literature and studies not published in English were excluded due to resource limitations. Two independent reviewers screened the references retrieved by the literature search based on our inclusion criteria. The findings of included studies were summarized in a narrative and tabular form according to component of delay.

Results: Our search yielded 5180 unique citations, of which 44 articles met our inclusion criteria. We present findings on the patient, illness, and healthcare provider/mental health system factors contributing to the delays in illness appraisal, help-seeking, diagnosis, and treatment.

Conclusions: To the best of our knowledge, this is the first systematic scoping review to explore the potential factors that influence delays in the treatment of BD in adolescents and young adults. Findings from this review will inform clinical practice and policy. We also demonstrate the utility of a systematic approach to identifying the components of delay, from symptom recognition through treatment, as a methodology to help identify knowledge gaps to inform future research.

Disclosure of Interest: None Declared

EPP0483

Concentration of HSPA1A and transthyretin proteins in the blood serum of patients with bipolar disorder

L. Smirnova^{1*}, E. Epimakhova¹, A. Seregin¹, A. Ryzhkova² and G. Simutkin³

¹Laboratory of Molecular Genetics and Biochemistry, Mental Health Research Institute, Tomsk National Research Medical Center of the Russian Academy of Sciences; ²Biochemistry, Siberian State Medical University and ³Affective States Department, Mental Health Research Institute, Tomsk National Research Medical Center of the Russian Academy of Sciences, Tomsk, Russian Federation

*Corresponding author.

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Introduction: Insufficient knowledge about the pathophysiological processes in bipolar disorder (BD) leads to difficulties in differentiating this disorder from other affective disorders. Quantitative analysis of serum protein profiles in BD expands our understanding of the pathophysiology of the disease and may aid in subsequent diagnosis. As a result of a previously conducted comparative mass spectrometric study of serum proteins in patients with depression, bipolar disorder and healthy donors, increased expression of Heat Shock 70kDa Protein1A (HSPA1A) and transthyretin was identified.

Objectives: Determination of HSPA1A and transthyretin concentrations in the blood serum of patients with mental disorders.