

objective was to determine whether there is association between emotion processing and psychosocial functioning.

Methods A sample of 53 EBP and 53 healthy controls matched for age, gender, education level and premorbid intelligence were studied. All subjects were assessed using the MATRICS Consensus Cognitive Battery (MCCB) and two additional executive function measures: the Trail Making Test–Part B and the Stroop Test. Emotion processing was examined using the Mayer-Salovey-Caruso Emotional Intelligence Test (MSCEIT). Psychosocial functioning was assessed using the Global Assessment of Functioning (GAF) scale and the Functional Assessment Short Test (FAST).

Results For the MSCEIT, EBP obtained lower total scores ($P=0.001$), experiential area scores ($P=0.012$), strategic area scores ($P=0.000$), perceiving emotions branch scores ($P=0.008$), understanding emotions branch scores ($P=0.014$) and managing emotions branch scores ($P=0.000$) than controls. There were no significant differences between groups for the using emotions branch ($P=0.113$). In addition, partial correlations controlling for sub-clinical psychopathology in EBP showed the existence of a significant correlation of MSCEIT total score and MSCEIT strategic area score with FAST total score.

Conclusions EBP exhibit deficits in several areas of emotion processing. Performance in emotion processing tasks is associated with social functioning in these patients.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EW52

Prepulse inhibition in euthymic bipolar disorder patients in comparison with control subjects

J.L. Santos^{1,*}, J. Mateo², A. Aparicio³, E.M. Sánchez-Morla⁴

¹ Hospital Virgen de La Luz, Psychiatry, Cuenca, Spain

² University of Castilla La Mancha, Innovation in Bioengineering, Cuenca, Spain

³ University of Castilla La Mancha, School of Nursing, Cuenca, Spain

⁴ School of Medicine, Psychiatry, Alcalá de Henares, Spain

* Corresponding author.

Introduction Deficient prepulse inhibition (PPI) of the startle response, indicating sensorimotor gating deficits, has been reported in schizophrenia and other neuropsychiatric disorders.

Objectives and aims The present study aimed to assess sensorimotor gating deficits in euthymic bipolar patients. Furthermore, we analysed the relationships between PPI and clinical and cognitive measures.

Method PPI was measured in 64 euthymic bipolar patients and in 64 control subjects matched for age, gender, education level and smoking status. Clinical characteristics and level of functioning were assessed in all participants using the Hamilton Depression Rating Scale (HDRS), Young Mania Rating Scale (YMRS) and Functioning Assessment Short Test (FAST). Cognition was evaluated using the MATRICS Consensus Cognitive Battery (MCCB) and the Stroop Test as an additional measure of executive function.

Results Compared with controls, patients with bipolar disorder exhibited PPI deficits at 60- and 120-millisecond prepulse-pulse intervals. Among patients with bipolar disorder, PPI was correlated with the social cognition domain of the MCCB. PPI was not significantly correlated with other clinical or neurocognitive variables in either group.

Conclusions Our data suggest that PPI deficit is a neurobiological marker in euthymic bipolar disorder, which is associated with social cognition but not with other clinical, functional or cognitive measures.

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EW54

Sensory processing patterns, coping strategies, and quality of life among patients with major affective disorders

B. Engel-Yeger¹, G. Serafini^{2,*}, X. Gonda³, M. Pompili⁴, M. Amore⁵

¹ Faculty of Social Welfare and Health Sciences, University of Haifa, Occupational Therapy, Haifa, Israel

² Section of Psychiatry, San Martino Hospital, University of Genoa, Neuroscience DINOGMI, Genoa, Italy

³ Kutvolgyi Clinical Center, Semmelweis University, Clinical and Theoretical Mental Health, Budapest, Hungary

⁴ Sant'Andrea Hospital, University of Rome, Neurosciences, Rome, Italy

⁵ Section of Psychiatry, San Martino Hospital, University of Genoa, Neuroscience, Genoa, Italy

* Corresponding author.

Introduction Several studies suggested the involvement of sensory perception in emotional processes and major affective disorders. Similarly, cognitive capacities and coping strategies are reported to influence quality of life of patients with unipolar and bipolar disorders.

Objectives The main objective of this study was to investigate the nature of the association between sensory processing patterns, coping strategies, and quality of life among patients with major affective disorders.

Aims The study aimed to compare unipolar/bipolar patients concerning sensory processing, coping strategies and quality of life (QOL); examine correlations between sensory processing and QOL; investigate the relative contribution of socio-demographic characteristics, sensory processing, and coping strategies to the prediction of QOL.

Methods Two hundred and sixty-seven participants, aged 16–85 years (mean = 53.6 ± 15.7), 157 diagnosed with unipolar major depressive disorder and 110 with bipolar disorder type I and type II completed the Adolescent/Adult Sensory Profile, Coping Orientations to Problems Experienced, and Short Form 12 Health Survey 2.

Results The unipolar and bipolar groups did not differ concerning sensory processing, coping strategies, and QOL. Sensory processing patterns correlated with QOL independently of the mediation by coping strategies. Correlations between low registration, sensory sensitivity, sensation avoidance, and reduced QOL were found more frequently in unipolar patients than bipolar patients. Elevated physical QOL was mainly predicted by lower age and lower sensory sensitivity whereas elevated mental QOL was mainly predicted by coping strategies.

Conclusions Future studies should further investigate the impact of sensory processing and coping strategies on patients' QOL to enhance adaptive and functional behaviors related to affective disturbances.

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EW55

Interictal dysphoric disorder – the bridge between epilepsy and bipolar disorder

R. Sousa*, M. Salta, B. Barata, J. Nogueira, J. Vieira, B. Ribeiro, R. Ribeiro, S. Mendes, R. Mendes, A. Gamito
Setúbal Hospital Center, Department of Psychiatry and Mental Health, Setúbal, Portugal

* Corresponding author.

Introduction Psychiatric disorders are frequent among patients with epilepsy. The association between epilepsy and mood disorders is recognized since the classical antiquity. Recent studies demonstrated that the prevalence of bipolar symptoms in epilepsy patients is more significant than previously expected. In the first half of the twentieth century, Kraepelin and Bleuler were the first to describe a pleomorphic pattern of symptoms claimed to be typical of patients with epilepsy and recently Blumer coined the term interictal dysphoric disorder to identify this condition. Although for some authors, the existence of this condition as a diagnostic entity is still doubtful, for others, it represents a phenotypic copy of bipolar disorder.

Objectives In this work, we start from the phenomenological similarities between the interictal dysphoric disorder and the bipolar disorder, to explore the neurobiological underpinnings that support a possible link between epilepsy and bipolar disorder.

Methods Research of articles published in PubMed and other databases.

Results Interictal dysphoric patients have features that resemble the more unstable forms of bipolar II disorder and benefit from the same therapy used in bipolar depression. Epilepsy and bipolar disorder share features like episodic course, the kindling phenomenon as possible pathogenic mechanisms and the response to antiepileptic drugs. The study of possible common biological processes like neurogenesis/neuroplasticity, inflammation, brain-derived-neurotrophic-factor, hypothalamus pituitary adrenal axis, provided promising but not consensual results.

Conclusions Further efforts to understand the link between epilepsy and bipolar disorder could provide the insight needed to find common therapeutic targets and improve the treatment of both illnesses.

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EW56

Comparison of treatment response of typical and atypical antipsychotics in acute mania

C.R. Medici, L.M. Kai, C. Kirkedal, S.P.V. Straszek*
Aarhus University hospital, Department Q, Risskov, Denmark
* Corresponding author.

Introduction The medical treatment of acute mania today mainly includes atypical and typical antipsychotics, lithium or valproate. Atypical antipsychotics are often used as first-line treatment, while typical antipsychotics come with the risk of severe long-term side effects and less used today. However, typical antipsychotics may lead to a faster reduction in the severity of mania or a faster remission of symptoms.

Objective To investigate whether the acute effect of typical antipsychotics differs from atypical antipsychotics measured by a daily mania rating-scale (MAS-M) and duration of treatment in a real-life clinical setting.

Aim To help determine if short-term treatment with typical antipsychotics may still be of benefit in the acute treatment of mania.

Methods This is a retrospective case record study. Patients admitted to an acute hospital ward with acute mania between 2012 and 2015 were included ($n = 100$). The daily use of atypical and typical antipsychotics will be compared by daily change in Bech-Rafaelsen Modified Mania Scale (Mas-M) score and time to discharge. The change in mania over time is presented visually using graph curves.

Results The data extraction and data handling will be executed in the winter 2015–2016.

Conclusions Any preliminary findings will be presented at EPA 2016.

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EW57

The metacognitive functioning in bipolar patients and in bipolar alcoholics patients

R. Vecchiotti^{1,2,3,*}, L. Meschini⁴, I. Borsella⁴, U. Pianella⁴, L. Orsolini^{1,2,3,5}, M. Panichi^{1,2}, A. Valchera^{1,2}

¹ Villa S. Giuseppe Hospital, Hermanas Hospitalarias, Department of Psychiatry, Ascoli Piceno, Italy

² Polyedra, Research, Teramo, Italy

³ Maastricht University, Department of Psychiatry and Neuropsychology, Maastricht, Netherlands

⁴ Studi Cognitivi, Psychotherapy, San Benedetto del Tronto, Italy

⁵ University of Hertfordshire, School of Life and Medical Sciences, Hatfield, Herts, United Kingdom

* Corresponding author.

Introduction Metacognition is described as the set of human abilities that allows us to recognize and think about own and other people's mental states. We use these skills in order to overcome psychological and interpersonal issues and to cope emotional, cognitive and behavioral suffering. Studies that focusing on metacognition in bipolar disorder (BD) are still limited and data are controversial. Our purpose is investigating the difference between BD patients and BD patients with alcohol addiction (BD+A), in terms of metacognitive functions. In addition, we want to assess among BD+A whether the increase in metacognitive functions mediates the relationship between symptoms at T0 and T1.

Methods Forty patients were recruited for this study. A set of tests was performed on each patient to formulate a metacognitive and clinical evaluation. A single measurement was performed on 20 BD patients. Two measurements (T0–T1) were carried out on the 20 BD+A patients, after an integrated treatment.

Results Data shown significant differences between these two groups. As regards the treatment of BD+A patients, differences were found between T0 and T1. Among the BD+A patients, reduction in the Beck Cognitive Insight Scale (BCIS-SC, P 0. 042) scores between T0 and T1, leads to the prediction of symptom improvement.

Conclusions Our results confirm the existence of a specific profile of metacognitive functioning in these patients. Our results reveal that the metacognitive functions appear to be predictors of the improvement in the remission of symptoms.

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Child and adolescent psychiatry

EW59

Correlation of vitamin D to attention deficit hyperactivity disorder

M. Abouzed*, A. Moshref, A. Elsherbiny, M. Elsheikh
Al-Azhar Faculty of Medicine, Psychiatry, Cairo, Egypt
* Corresponding author.

ADHD is one of the most common neurodevelopmental psychiatric disorders. Many factors have been identified as the cause of ADHD. ADHD is thought to be the result of interactions between biopsychosocial factors leading to neurobiological change. The aim of this study is to investigate the association between serum level of vitamin D and symptoms of attention deficit hyperactivity disorder (ADHD).

Design This is a case-control study which was conducted in children below 12 years of age from June 2013 to May 2014 at

