

when the onset of the disease is insidious and subthreshold. However, there are severe early-onset forms of OCD in which the request for help is anticipated due to the severity of the symptoms, the DUI is shorter, but the prognosis is still negative.

Conclusions: The present review confirms that longer DUI has a negative impact on the long-term outcome of patients with OCD. Furthermore, it is reasonable to hypothesize that cultural factors, such as the perception of the disease and the ability to access treatment, may result in a prolongation of the DUI. All these elements cannot be evaluated in our review due to the paucity of studies on the topic. Future studies could be useful to better understand the causes of a longer DUI, to guide and to promote the dissemination of early interventions with a specific focus on OCD symptoms.

Disclosure of Interest: None Declared

EPP0632

Habit Learning in OCD: Preliminary Data from a Spanish Sample

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Introduction: Instrumental learning involves goal-directed and habitual systems. The Slips-of-Action Task (SOAT) is extensively used to measure habit tendencies and the likelihood of making erroneous responses for devalued outcomes. The SOAT provides a Devaluation Sensitivity Index (DSI), a measure of the balance between relative goal-directed and habitual learning. Individuals with Obsessive-Compulsive Disorder (OCD) often engage in repetitive actions, suggesting a potential deficit in goal-directed control and an increased reliance on habitual learning. Previous literature has shown that medicated OCD adults performed worse on the SOAT task than healthy controls.

Objectives: To compare habit learning performance in an unmedicated sample:

- **Goal 1:** Between OCD and Healthy Controls (HC)
- **Goal 2:** Across four groups: adult OCD, adult HC, children OCD, and children HC

Methods: Participants: Eighty-three participants (44 OCD patients and 38 healthy controls) completed the study with usable task data. The 44 OCD patients comprised 17 adults (mean age: 26.76 years, SD: 8.61 years) and 27 children/adolescents (mean age: 12.84 years, SD: 2.59 years). The 38 healthy controls included 17 adults (mean age: 30 years, SD: 7.49 years) and 21 children/adolescents (mean age: 14.1 years, SD: 2.19 years). All participants were unmedicated. **Measures:** Participants completed an adapted version of the "Fabulous Fruit Game", which included an instrumental training phase to learn Stimulus-Response-Outcomes (S-R-O) associations and a SOAT

to assess the strength of learned S-R-O associations. DSI was calculated by subtracting the percentage of responses made toward devalued outcomes from the percentage of responses made toward still valuable outcomes. **Behavioral Analyses:** Student's t-test comparing individuals with OCD to HC and a ONEWAY ANOVA to examine group differences across multiple categories.

Results: Goal 1: DSI comparison between individuals with OCD and HC revealed a significant difference, with HC demonstrating superior performance ($t(60.9) = 2.60, p = .012, \text{Cohen's } d = .546$).

Goal 2: The overall DSI comparison across adult OCD, adult HC, children OCD, and children HC showed a non-significant difference ($F(3) = 3.407, p = 0.22$). However, post hoc analysis revealed significant differences between Adult HC and Youth OCD (I-J Scheffe = 28.82, $p = .033$), indicating superior performance in adult HC.

Conclusions: This study highlights altered Habit Learning in unmedicated OCD individuals, supported by significant DSI differences compared to HC. Age-related distinctions were observed, emphasizing the need for age-sensitive interventions in understanding and addressing habit-related challenges in OCD.

Disclosure of Interest: None Declared

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Acute obsessive symptoms: case report of a PANDAS-like syndrome in an adult patient.

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Introduction: Neuropsychiatric disorders can develop following a group A β -hemolytic streptococcal infection, through autoimmune inflammation of the nervous system. Sydenham's chorea and PANDAS (Pediatric Autoimmune Neuropsychiatric Disorders Associated with Streptococcal Infection) are the two most well-known syndromes, primarily affecting children but rarely observed in adults.

Objectives: Our aims are to contribute to the scientific understanding of adult PANDAS-like syndrome and provide a comprehensive literature review on the subject.

Methods: Case report using clinical records and a non-systematic literature review.

Results: A 24-year-old female presented to the emergency department with profound emotional distress triggered by intrusive thoughts of existential dread, accompanied by compulsive praying. She reported that these symptoms had commenced five days earlier. Two days prior to the onset of her obsessions, she had experienced a high fever, odynophagia, cough, and chills and received an empirical diagnosis of tonsillitis following a physical examination. She was prescribed antibiotics with good response. She revealed that she had experienced two prior episodes of similar anxiety and obsessions when she was approximately seven years old.