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Introduction: Early life stress (ELS) is a significant risk factor for major depressive disorder (MDD) in adults. Functional magnetic resonance imaging (fMRI) studies using face emotion processing paradigms have found altered blood-oxygen-level-dependent (BOLD) responses in the cortico-limbic network both in individuals exposed to ELS and in patients with MDD. Thus, early life stress may have a long-lasting impact on brain areas responsible for the processing of socio-affective cues.

Objectives: By applying a facial emotion recognition (FER) fMRI paradigm, we examined the long-term effect of childhood adversity on brain activity in MDD patients with and without ELS.

Methods: MDD patients without ELS (MDD, N=19), those with ELS (MDD+ELS, N=21), and healthy controls (HC, N=21) matched for age, sex, and intelligence quotient underwent fMRI scanning while performing a block design FER task with faces expressing negative emotions. The severity of ELS was assessed with the 28-item Childhood Trauma Questionnaire.

Results: Both MDD and MDD+ELS patients were slightly impaired in recognizing sad faces. Statistical analysis of brain activity found that MDD+ELS patients had significantly reduced negative BOLD responses in the right anterior paracingulate gyrus, subcallosal cortex accumbens compared to HCs. Moreover, the MDD+ELS group had a significantly increased negative BOLD signal in the right postcentral and precentral gyri relative to the HC group. MDD+ELS patients had reduced negative BOLD response in their anterior paracingulate gyrus compared to the MDD group.

Conclusions: Our results support that adult MDD patients with significant ELS are impaired in facial emotion recognition and they display functional alterations in the frontostriatal circuits.

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Keywords: early life stress; functional MRI; facial emotion recognition; major depressive disorder

Addictive Disorders

O0041

Atypical working hours are associated with substance use, especially in women: longitudinal analyses from the CONSTANCES cohort

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Introduction: Difficult working conditions could be associated with addictive behaviors.

Objectives: To examine the prospective associations between atypical working hours and substance use, including sugar and fat consumption.

Methods: In the CONSTANCES cohort, a total of 47,288 men and 53,324 women currently employed were included from 2012-2017 for tobacco and cannabis outcomes, and 35,647 and 39,767, respectively from 2012-2016 for alcohol and sugar and fat outcomes, and they were then followed up annually. Atypical working hours were self-reported at baseline and considered three different indicators: night shifts, weekend work and non-fixed working hours. Generalized linear models computed odds of substance use and sugar and fat consumption at follow-up according to baseline atypical working hours while adjusting for sociodemographic factors, baseline depression and baseline level of consumption.

Results: Night shifts increased significantly the odds of using tobacco in women (Odds ratios, ORs varying from 1.55 to 1.62) and cannabis in men (ORs varying from 1.80 to 1.95). Weekend work increased the odds of using tobacco (ORs varying from 1.51 to 1.67) and alcohol (OR of 1.16) in women. Non-fixed working hours increased the odds of using tobacco and alcohol in men and women (ORs varying from 1.15 to 1.19 and 1.12 to 1.14, respectively). Dose-dependent relationships were found for tobacco use in women (P for trends < 0.0001). No significant associations were found for sugar and fat consumption.

Conclusions: The role of atypical working hours on substance use should be taken into account by public health policy makers and clinicians for information and prevention strategies, especially among women.

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Keywords: Atypical working hours; substance use; Epidemiology; Sugar and fat

O0042

Increased Risk for Substance Use-Related Problems in Mild Intellectual Disability: A Population-Based Cohort Study

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Introduction: Intellectual disability (ID) has been linked to substance use-related problems (SUP). However, previous research is limited by the small sample sizes, lack of general population

comparison and have not accounted for familial confoundings. The role of other psychiatric comorbidities also remains unknown.

Objectives: To examine the risk of SUP in individuals with mild-ID and assess whether the associations depend on other psychiatric comorbidities, controlling for potential familial confounding.

Methods: Population-based cohort study of individuals born in Sweden 1973-2003. We identified 19,078 individuals with mild-ID, 953,900 reference individuals from the general population, and 20,722 full-siblings of individuals with mild-ID. Conditional logistic regression models were used to compare individuals with mild-ID to the general population and their full-siblings regarding the risk of SUP, including alcohol and substance use disorders, alcohol and substance-related somatic diseases, substance-related crime, and substance-related death. Analyses were repeated stratified by the presence of psychiatric comorbidities.

Results: Individuals with mild-ID had increased risks of any SUP (adjusted OR [95%CI]: 1.41 [1.35, 1.47]), compared to the general population, including alcohol-related somatic diseases (3.27 [1.92, 5.59]), alcohol (2.05 [1.91, 2.22]) and drug-use disorder (1.79 [1.69, 1.91]), and alcohol (1.36 [1.19, 1.49]) and drug-related crime (1.27 [1.19, 1.36]). The risk of SUP for individuals with mild ID was particularly elevated with comorbid mood (3.74 [3.47, 4.04]), anxiety (3.30 [3.09, 3.53]) and attention-deficit/hyperactivity disorders (2.61 [2.44, 2.80]). Increased risk of SUP remained significant when controlling for familial confounding.

Conclusions: Individuals with mild-ID, especially those with other psychiatric comorbidities, are at increased risks of SUP.

Disclosure: No significant relationships.

Keywords: Substance Use-Related Problems; intellectual disability; Population-Based Cohort Study

O0043

The role of substance use in the risk of not getting employed among young people: Prospective findings from the CONSTANCES cohort.

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Introduction: It remains unclear whether substance use in youth could be associated with a lower likelihood of accessing employment.

Objectives: To examine prospectively associations between substance use and the risk of not getting employed among young people.

Methods: From the French population-based CONSTANCES cohort, 2,873 students who never worked were included between 2012 and 2018 and followed-up for 2.7 years in average. Generalized estimating equations computed the odds of being unemployed versus employed according to substance use at baseline controlling for sociodemographic factors and depressive state. Tobacco use (smoking status and number of cigarettes), cannabis use frequency, and at-risk alcohol use according to the Alcohol Use Disorder Identification Test (total score >7) were introduced separately in the models.

Results: Tobacco use wasn't significantly associated with employment. Cannabis use at least weekly, and at-risk alcohol use, were associated with increased odds of being unemployed (OR=1.85, 95%CI(1.29, 2.64)) and OR=1.34, 95%CI(1.04, 1.71)), respectively. Additional analyses on sub-scores of alcohol use suggested that the association was mainly driven by alcohol dependence rather than frequency of use.

Conclusions: Public health campaigns must target youth by advising them of the detrimental roles of regular cannabis use and at-risk alcohol use and their lower chances of getting employed.

Disclosure: No significant relationships.

Keywords: Cannabis use; Alcohol use; Tobacco use; Employment

O0044

Psychological impacts of Intentional Non-Medical Fentanyl Use Among People Who Use Drugs: A Systematic Review

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Introduction: The use of non-medical fentanyl and structurally related compounds has changed drastically over the last ten years. Community members working with individuals who use fentanyl intentionally currently struggle with the rapidly evolving drug markets and patterns of use, thereby failing to adapt treatment approaches and harm reduction strategies to individuals with severe opioid use disorder (OUD) and concurrent psychiatric disorders.

Objectives: This systematic review aims to evaluate intentional fentanyl among PWUD by summarizing demographic variance, concurrent disorders, and resulting patterns of use.

Methods: The search strategy in this study was developed with a combination of free text keywords and Mesh and non-Mesh keywords, and adapted with database-specific filters to Ovid MEDLINE, Embase, Web of Science, and PsychINFO (May 2021). The search results resulted in 4437 studies after de-duplication, of which 132 were selected for full-text review. A total of 42 articles were included in this review.

Results: It was found that individuals who use fentanyl intentionally were more likely to be young, male, and Caucasian. Individuals who intentionally use fentanyl were more commonly homeless, unemployed or working illegally, and live-in cities. Independent correlates of any purposeful fentanyl use included moderate/severe depression.