cellular oxidative damage by measuring lipid peroxidation (LPO) levels and the antioxidant defense system by the evaluation of catalase (CAT) and superoxide dismutase (SOD) activities.

Results: In the present work, we observed a significant increase in LPO levels in both SCH and BD disorders that was not neutralized by the antioxidant defense. It was found that SCH patients, despite exhibiting greater activities of SOD and CAT compared to BD individuals, also showed significantly higher levels of oxidative damage. The differential oxidative profile observed between SCH and BD individuals allowed to perform an individually analysis of patients diagnosed with FEP. Although it was not possible to identify the type of psychotic disorder of all the patients with FEP, the results obtained showed that while several individuals exhibited an oxidative prolife similar to that observed in SCH patients, other individuals presented a prolife very similar to that found in patients with BD.

Conclusions: The current work reveals that LPO is a potential indicator of worse prognosis after being differentially modified in both SCH and BD. Moreover, SOD and CAT have been identified, by presenting an opposite profile between patients with SCH and BD, as potential preliminary biomarkers for a discriminatory diagnosis in an early stage of the disorder.

Disclosure of Interest: None Declared

EPP0671

Dynamics of contrast-frequency characteristics of the visual system in patients with schizophrenia

M. A. Tumova^{1,2}*, I. I. Shoshina¹, V. V. Stanovaya², Z. T. Guseynova² and M. V. Ivanov²

¹Institute for Cognitive Research, St. Petersburg State University and ²Biological therapy of the mentally ill, V.M. Bekhterev National medical research center psychiatry and neurology, Saint Petersburg, Russian Federation

*Corresponding author. doi: 10.1192/j.eurpsy.2023.967

Introduction: Visual impairment in schizophrenia is of interest as a potential biomarker of the mental state. The study of visual impairment in patients with schizophrenia is difficult due to the fact that visual perception can be influenced not only by the patient's condition, but also by age, drug treatment, concomitant eye diseases, etc. To reduce the influence of these factors, we studied visual disturbances in schizophrenic patients in dynamics at the second and eighth weeks of stable antipsychotic single treatment. Objectives: To reveal changes in visual impairment in inpatients with schizophrenia on the background of changes in mental state. Methods: Eleven inpatients with schizophrenia who received antipsychotic monotherapy and thirteen healthy subjects of the same age and sex were included in the study. Examinations were performed at weeks 2 and 8 of treatment. The contrast-frequency characteristics of the visual system were examined using computer visocontrastometry. Visocontrastometry was performed in Gabor element contrast detection (gratings) with spatial frequencies of 0.4, 0.6, 0.8, 1.0, 4.0, 10.0 and 17.9 cycles/degree. Images of Gabor elements of different spatial frequency were repeated in random order 8 times each. The severity of the mental state was assessed during the interview using the PANSS (Positive and Negative Syndrome Scale).

Results: Patients' total PANSS score at week 2 averaged 94.09 ± 17.58 and at week 8 averaged 52.45 ± 6.06 ; at week 8 the

total score was significantly lower than at week 2 (V = 66, p-value = 0.004). In the low-frequency region after treatment, patients tended to have lower thresholds (V = 2207, p-value = 0.060), but both at week 2 and week 8, thresholds were significantly higher in patients than in the healthy group (W = 7233, p-value < 2.2e-16, W = 6924.5, p-value = 1.204e-11, respectively). Mid-range frequencies increased at week 8 compared with week 2 (V = 925, p-value = 0.003), but were also lower at weeks 2 and 8 than in the healthy group (W = 1479, p-value = 7.247e-12, W = 3156.5, p-value = 0.004, respectively). In the high frequency region, thresholds also increased after the treatment (V = 908, p-value = 2.084e-05), at week 2, thresholds in patients were significantly lower than in healthy controls (W = 2574.5, p-value = 2.757e-07), and at week 8, thresholds in the patient and healthy groups were not different (W = 4759.5, p-value = 0.461).

Conclusions: The impairments in the low spatial frequencies in schizophrenic patients appear earliest and, apparently, are the most persistent. Changes in the middle and high frequencies appeared to be more variable with changes in the mental state. Unfortunately, our design does not allow us to judge the persistence of the revealed changes. Further prospective studies are needed to investigate the relationship of visual disturbances with other symptoms.

Disclosure of Interest: None Declared

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EPP0672

Sleep disorders in patients with a first psychotic episode: a case-control study

M. Abdellatif^{*}, H. Nefzi, J. Nasri, M. Methni, K. Rania, M. Karoui and F. Ellouze

Psychiatry "G" department, Razi Hospital, Manouba, Tunisia *Corresponding author. doi: 10.1192/j.eurpsy.2023.968

Introduction: Patients with chronic schizophrenia experience significant disturbances in the quality and quantity of their sleep and it had been mainly attributed to severity of symptoms and antipsychotic use. Recent studies suggested that antipsychotic-naïve early course patients with schizophrenia and their non-psychotic first-degree relatives also show altered sleep quality.

Objectives: In this study we aimed to compare sleep parameters in antipsychotic-naive first-episode schizophrenia patients to their healthy siblings and age- and sex-matched healthy controls.

Methods: We conducted a cross-sectional, descriptive case-control study in the Psychiatry « G » department at Razi Hospital, for a period of six months. Our sample consisted of three groups: a group of schizophrenic patients, a group of their healthy siblings and a group of healthy controls. The three groups were matched by age and sex. The Positive and Negative Syndrome Scale (PANSS) was used to assess the severity of symptoms in patients with schizophrenia. The Morningness-Eveningness Questionnaire (MEQr), Epworth Sleepiness Scale (ESS), and Pittsburgh Sleep Quality Index (PSQI) were used in the three groups to assess Circadian preference, daytime sleepiness and sleep quality.

Results: There was no significant difference between the groups regarding the chronotype. Patients had significantly higher daytime

sleepiness compared to siblings (p=0.001) and controls (p<0.001). Patients also had poorer quality sleep (PSQI total score) than siblings (p<0.001) and controls (p<0.001), longer sleep latency than siblings (p=0.003) and controls (p<0.001); lower habitual sleep efficiency than siblings (p=0.003) and controls (p<0.001). Siblings had poorer sleep quality (p=0.001), longer sleep latency (p=0.006) and shorter sleep duration (p=0.033) compared to control subjects. **Conclusions:** Our results joined those of the literature concerning the significant prevalence of sleep quality in unaffected siblings compared to healthy controls supports the hypotheses suggested in the literature that sleep disorders may be markers of genetic susceptibility to schizo-phrenia and serve as a potential endophenotype of the disease.

Disclosure of Interest: None Declared

Anxiety Disorders and Somatoform Disorders 02

EPP0673

Developing and testing a Video assisted brief CBT intervention for children and adolescent with anxiety disorder

M. Purkayas
tha MUKHERJEE 1* , S. T. Spalzang 1 , P. Kanda
samy 2 , M. T 3 and D. Pandian 1

¹Psychiatry, JIPMER, Puducherry; ²Psychiatry, Maanas, Salem and ³community medicine, JIPMER, Puducherry, India *Corresponding author. doi: 10.1192/j.eurpsy.2023.969

Introduction: CBT for childhood anxiety is used as the gold treatment of choice for anxiety disorders in children. Video-assisted CBT can serve as a cost and time effective intervention method in a low-resource setting.

Objectives: To develop, validate video-assisted CBT for children and adolescents with Anxiety disorder with secondary objective to explore feasibility of brief video assisted CBT as an additional component to treatment as usual in improving symptom severity. Methods: Study was divided into 2 phases. In the 1st phase videos (1 common introductory video and 2 videos each for children and adolescents, in Tamil and English) based on a validated CBT workbook was made. A second phase involving exploration of feasibility of video-based interventions along with treatment-as-usual was carried out in OPD of tertiary care hospital. Of 13 children recruited with anxiety disorder,2 were lost to follow-up. In 2nd phase, intervention delivered on OPD computer and provided to family members to watch at home through phone. Assessment of symptoms were done using SCARED, CGAS, CGI-S, VAS (parent) at baseline & 8 weeks. Written narratives were taken from participant at baseline & 8 weeks. Parent semi structured proforma was used to assess perceived benefit by parent.

Results: In first phase validation was obtained from 3 experts. All experts agreed or strongly agreed for videos to be appropriate for use in children and adolescents with anxiety disorder. Most frequent diagnosis was social anxiety disorder.Family history of psychiatric illness was there in 61.54% of participants. Post intervention at 8 weeks when compared to baseline found statistically significant reduction in symptom severity on SCARED, CGAS and VAS (parent) scores. In parent semi structured

proforma good improvement in understanding, perceived reduction of symptom severity reported.For qualitative data, manual content analysis done with clustering of themes and sub-themes.

In theme of Treatment impact on self, codes of decreased selfesteem and overthinking generated the maximum response. In theme of impact of illness in various contexts, codes of peer relationship and academic performance generated the maximum responses. At the end of 8 weeks participants reported Relaxation techniques as most used, followed by coping skills and challenging negative thoughts with help of tension diary respectively.

In aspects of videos liked by parents, brevity and simplicity generated most responses. In aspects requiring improvement most of parents reported no improvement needed in videos.

Conclusions: This pilot study on video based CBT can serve as a time and cost-effective treatment strategy for anxiety disorders in children and adolescents especially in low resource settings. Similar studies involving development of similar videos can be made for various mental illnesses in various vernacular languages and tested in a larger population.

Disclosure of Interest: None Declared

EPP0674

Prevalence and Correlates of Anxiety in Fort McMurray Vulnerable Population during the COVID-19 Pandemic

R. Shalaby¹*, E. Eboreime¹, N. Nkire¹, B. Agyapong¹, H. Pazderka¹, G. Obuobi-Donkor², M. Adu², W. Mao¹, E. Owusu¹,

F. Oluwasina¹ and V. Agyapong¹

¹Department of Psychiatry, University of Alberta, Edmonton and ²Department of Psychiatry, Dalhousie University, Halifax, Canada *Corresponding author. doi: 10.1192/j.eurpsy.2023.970

Introduction: The COVID-19 pandemic has produced negative mental health outcomes, which were more prominent in vulnerable communities, such as Fort McMurray (FMM), the community that experienced prior similar disasters.

Objectives: This study aimed to examine the likelihood and correlates of anxiety symptoms among FMM residents, during the COVID-19 pandemic.

Methods: A cross-sectional online survey questionnaire was applied between 24 April and 2 June 2021, at FMM community to gather a set of data, including sociodemographic, COVID-19, and clinical information. Generalized anxiety disorder was the main outcome of the study, and was measured using GAD-7 scale. **Results:** Overall, 186 individuals completed the survey (response rate 74.7%). Most of the respondents were females (159, 85.5%); above 40 years (98, 52.7%); employed (175, 94.1%); and in relationship (132, 71%). The prevalence of moderate-to-severe anxiety was (42.5%, 71) on GAD-7 self-reported scale. Subscribers who reported that they would like to receive mental health support; have received no family support since COVID-19 declaration; and have lost their job during the pandemic were all more likely to report moderate-to-severe anxiety (OR = 3.39; 95% CI: 1.29-8.88), (OR = 4.85; 95% CI: 1.56-15.03), and (OR = 4.40; 95% CI: 1.01-19.24), respectively.

Conclusions: Anxiety levels were high among FMM residents, compared to levels before COVID-19. Clinical and social factors