

Conclusions: Psychiatrists' access to professional resources can be reliably measured by a 11-item questionnaire and can be used to test the influence of their professional social capital on different outcomes.

Disclosure of Interest: None Declared

EPP0337

Subjective Triggering Conditions of Affective Episodes in Adolescents and Young Adults from the General Population

L. Reichertz, C. Voss and K. Beesdo-Baum*

Technische Universität Dresden, Dresden, Germany

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.654

Introduction: Affective episodes often emerge in adolescence and young adulthood. Identification of factors subjectively associated with their onset may improve aetiological models and targeted intervention.

Objectives: To examine precipitating conditions of (hypo-)manic and depressive episodes in adolescents and young adults from the general population.

Methods: A random sample of 14-21 year-olds was drawn from the population registry of Dresden, Germany, and N=1180 were assessed in 2015/2016 (response rate: 21.7%). Lifetime depressive and (hypo-)manic symptoms as well as full-threshold depressive and (hypo-)manic episodes (DSM-5) were identified using standardized interview. Participants reporting depressive or (hypo-)manic symptoms were asked whether and which events or conditions they associate with episode onset. Besides responses on a list providing potential triggering conditions a free answer was possible. Qualitative content analysis preceded quantitative logistic regression analyses (significance level $p < .05$). Considered categories were: negative life events (further divided for depression into loss/danger events, burdensome life conditions, and interpersonal factors), events requiring adaptation, positive life events, internal factors, and other factors.

Results: The vast majority of participants reporting depressive (n=682) respectively (hypo-)manic (n=200) symptoms also reported a precipitating condition (94.7%, 83.1%). There was no significant association between any triggering condition and the occurrence of a full-threshold depressive (n=206) or (hypo-)manic (n=25) episode. However, the number of reported categories of precipitating conditions was associated with full-threshold depressive and (hypo-)manic episodes. Among those with depressive or (hypo-)manic symptoms and at least one reported precipitating condition, multiple regression models including all condition categories showed that in particular internal factors, interpersonal problems and other factors were associated with the occurrence of a full-threshold depressive episode (n=199) and positive life events as well as internal factors were associated with the occurrence of a full-threshold (hypo-)manic episode (n=21).

Conclusions: Adolescents and young adults from the general population usually associate the onset of phases with affective symptoms with precipitating conditions but these do not necessarily signal the emergence of a diagnostically relevant episode. Nevertheless, a greater number of and the presence of particular precipitating conditions may indicate the emergence of full-blown depressive or (hypo-)manic episodes. Thus, asking for subjective triggers appears relevant and may guide early identification and intervention.

Disclosure of Interest: None Declared

EPP0338

Follow-up Study Tracking Children's Development from Preschool till Middle School

K. Nomura* and K. Yokoyama

Nagoya university, Nagoya, Japan

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.655

Introduction: Screening for early detection of health issues and support are provided to children needing developmental support. In Japan, a significant percentage of infants requiring support are identified during health checkups. Sometimes, however, problems are first observed when children are of school age. It is, therefore, important to identify the age at which children need early support.

Objectives: Of the children born in 2005 in Kanie-cho, in Japan, 106 participated in the survey at all time points: age 5, first grade, fifth grade, and eighth grade.

Methods: The medical checkup results of the participants at age 5 were used to determine who among them needed support After entering school, the participants who scored less than 70 points on the Children's Global Assessment Scale, where their adjustment was assessed based on the interview with the homeroom teacher, were considered maladjusted.

Results: The results are presented in Table 1.

Thirty participants needed supports at age 5; of these, 20 (66.7%) were maladjusted at any point in their school years—19 (95%) in the first grade, 14 (70%) till the fifth grade, and five (25%) till the eighth grade.

Of the 76 participants who did not need support in early childhood, 24 (31.6%) were maladjusted at some point in their school years—nine (37.5%) experienced maladjustment in the first grade, but none of them continued to be maladjusted till the fifth grade, and 14 (58.3%) who were not maladjusted in the first grade experienced it in the fifth or eighth grade (adolescents).

Thus, the participants maladjusted in their school years were categorized as follows:

1. The developmental disorders group (experiencing maladjustment throughout since early childhood): 19
2. The "first grade problem" group (experiencing transient problems only in the first grade): 9
3. The adolescent group (experiencing problems during adolescence): 14

Image:

“Maladjustment” in the first, fifth, and eighth grades and needed supports in preschool

Grade	Needed supports in preschool		Maladjustment in the first grade	Maladjustment in the fifth grade	Maladjustment in the eighth grade
	Yes	No			
1st to 8th	5	0	○	○	○
1st to 5th	6	0	○	○	
Only 1st	8	9	○		
Only 5th	0	6		○	
Only 8th	0	5			○
5th to 8th	1	3		○	○
Other	0	1	○		○
No maladjustment	10	52			
Total	30	76	29	21	15

Conclusions: Since maladjusted children with developmental disabilities are identified in early childhood, support can be provided before they reach school age. Many children with developmental disabilities improve their adjustment as they grow up. It is thus advisable to take a long-term perspective in dealing with problematic behaviors.

From late school age to adolescence, problems unrelated to developmental disabilities emerge. By listening to the child’s upbringing, it may be possible to ascertain whether or not the problem stems from a developmental disability.

Disclosure of Interest: None Declared

EPP0339

Substance Use among youths in Uganda during the COVID-19 pandemic: Associated factors and prevalence:

L. Ssenyonjo^{1,2*} and I. Ddumba²

¹Research and Innovation, African Research center 4 Ageing & dementia and ²Nursing, Victoria University, Kampala, Uganda

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.656

Introduction: Although studies have demonstrated that younger people are at high-risk of instigating alcohol, substance use and development of related disorders, the trend is gradually changing. An observed gradual initiation and substance use among older persons, especially during the COVID-19 pandemic. However, there is dearth of data on about the prevalence and determinant of substance use during COVID-19 pandemic in Uganda.

Objectives: Determine the prevalence and determinants of substance use during COVID-19 pandemic in Uganda

Methods: A cross-sectional design and probability based sampling was applied. Data was collected among 474 older persons aged 50 years and above, that resided in the central region of Uganda. A multivariate logistic regression was used to assess the socio-economic, demographic and health related correlates of alcohol and tobacco use.

Results: 9.2% and 5.4% of older persons were taking alcohol and smoking before the COVID-19 pandemic. However, an observed increase of 14% of smoking and alcohol intake among older persons during the pandemic. Being male had higher odds of substance use than their female counterparts. Older persons with tertiary education and low (poor) wealth quantile, had lower odds of substance use than their counterparts.

Conclusions: Our finding highlights increased substance use among older persons during the COVID-19 pandemic. Designing targeted measures and policies to deter the substances use among older persons is critical to address this vice, especially during the pandemic and possible future disease outbreaks.

Disclosure of Interest: None Declared

Neuroscience in Psychiatry 01

EPP0340

NAA and BOLD dynamics after single short stimulus in motor cortex of schizophrenia patients

M. Ublinskiy^{1*}, A. Manzhurtsev¹, T. Akhadov¹ and I. Lebedeva²

¹Radiology, Clinical And Research Institute Of Emergency Pediatric Surgery And Trauma and ²Psychiatry- National Mental Health Research Centre, Moscow, Russian Federation

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.657

Introduction: Endogenous psychoses, e.g. schizophrenia, are a pressing problem of modern medicine and biology. Among various neurobiological models of schizophrenia, much attention is paid to disturbances in the brain neural activity and metabolism.

Objectives: The aim of this study was to analyze dynamics of motor cortex metabolites in the norm and in early stage of schizophrenia in period of BOLD response to event related single stimulus using MRI methods (fMRI and NMR).

Methods: Study was performed on clinical Phillips Achieva 3.0 T MRI scanner. Volume of interest in motor cortex was localized on the base of fMRI study (EPI FFE, TR = 3000 ms, TE = 30 ms) as the zone of activation (Fig 1) caused by bottom push with the forefinger in response to single auditory stimuli transmitted with the 18 s periodicity. The BOLD signal was measured each 3 sec. 1H MR spectra (PRESS, TE = 30 ms TR = 3000 ms) were run; FID signals for time points t = 0, 3, 6, 9, 12, 15, 18 s after stimulus were summarized (Fig 2). Thus, the synchronization of BOLD and metabolic responses to single stimulus was achieved. The same method was applied for spectra accumulation in resting state. For FID processing custom made software was used (with apodization filtering (LB = 20, GB = -5), FT and manual phase correction). NAA, Cho, Cr signal intensities for each time point were normalized to their values at t = 0 and to the volume of activated cells