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EPP0115

Clinical Feasibility of Speech Phenotyping for Remote Assessment of Neurodegenerative and Psychiatric Disorders (RHAPSODY): a study protocol

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Introduction: The diagnosis of neurodegenerative and psychiatric disorders (NPDs) in primary care can suffer from inefficiencies resulting in misdiagnoses and delayed diagnosis, limiting effective treatment options. The development of speech and language-based profiling biomarkers could aid in achieving earlier motor diagnosis for PD for instance, or more accurate diagnosis of clinically similar or late presenting NPDs.

Objectives: RHAPSODY aims to investigate the feasibility of the remote administration of a battery of speech tasks in eliciting continuous narrative speech across a range of NPDs. The project also aims to determine the feasibility of using acoustic and linguistic biomarkers from speech data to support the clinical assessment and disambiguation of common NPDs

Methods: All participants (n=250) will take part in a single virtual telemedicine video conference with a researcher in which they are screened and complete a battery of speech tasks, in addition to cohort-specific screening measures. Over the following month, participants will be asked to complete a series of short, self-administered speech assessments via a smartphone application.

Results: The speech tasks will be audio-recorded and analysed on Novoic's technology platform. Objectives will be analysed using measures including average length of speech elicitation for speech tasks, intra- and inter-subject variance, differences in linguistic patterns, and response rates to speech assessments.

Conclusions: The analyses could help to identify and validate speech-derived clinical biomarkers to support clinicians in detecting and disambiguating between NPDs with heterogeneous presentations. This should further support earlier intervention, improved treatment options and improved quality of life.

Disclosure: In terms of significant financial interest and relationships, it is emphasised that the private organisation Novoic, who aim to develop speech algorithms for diagnostic use, is the study's sponsor and employees or former employees of this company comprise

Keywords: Speech; affective disorders; Neurodegenerative Disorders; Artificial intelligence

EPP0112

Comparison of two questionnaire for subjective symptoms of dry eye in patinents with schizophrenia

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doi: 10.1192/j.eurpsy.2022.436

Introduction: Psychiatric disorders may be one of considerable contributing factors for dry eye symptoms and the severity of subjective symptoms of dry eye are often related to psychological factors. **Objectives:** The aim of this research was to determine which of two chosen questionnaires for subjective symptoms of dry eye (Ocular Surface Disease Index and Schein questionnaire) is more reliable in the assessment of dry eye in patients with schizophrenia.

Methods: Our research included 80 patients of both sexes with schizophrenia ranging between the age of 25 and 55 who have been taking antipsychotics (clozapin, olanzapin, quetiapin) for five years and were in remission. All participants were required to satisfy all included and excluded criteria. They all filled out the Schein and OSDI questionnaires for assessment of subjective symptoms. Tear break-up time test (TBUT) for objective evaluation of tear film stability was also performed. In order to determine the correlation between two subjective and objective tests we calculated Spearmans correlation coefficients.

Results: A analysis shows that there are no statistically significant differences between the correlations. Both subjective questionnaires are statistically significantly and negatively related to the TBUT test, showing that an increase in the results on the OSDI and Schein's questionnaires led to the decreases in the results on the TBUT test. **Conclusions:** In patients with schizophrenia the OSDI and Schein questionnaires are equally reliable in the assessment of subjective symptoms of Dry eye disease. Considering that, OSDI is more common in clinical practice, it is recommended for use in patients with schizophrenia.

Disclosure: No significant relationships. **Keywords:** dry eye disease - Schein questionnaire - OSDI questionnaire - schizophrenia

EPP0115

Psychotic symptoms in Cushing's syndrome secondary to ACTH-secreting lung carcinoid tumor: report of a case.

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Introduction: Cushing's syndrome is a hormonal disorder caused by chronic exposure to excess glucocorticoids, either exogenous or endogenous. The bronchial carcinoid tumor is an extremely rare origin, described in less than 1% of cases. The most frequent psychiatric symptoms are depression and anxiety, with manic

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and psychotic symptoms being less frequent. Psychotic symptoms are difficult to manage, as they are usually resistant to antipsychotic treatment, which is why it is considered an indication for medical treatment of Cushing's syndrome.

Objectives: To give visibility to this type of psychotic disorders of organic origin to deepen their study as well as raise awareness among professionals dedicated to clinical care with the intention of improving their prevention.

Methods: A description of a clinical case is made, accompanied by a bibliographic review on psychosis of endogenous corticosteroid origin.

Results: We describe the case of a 44-year-old woman who was admitted to the charge of Internal Medicine due to Cushing's syndrome. During her admission, she presented a debut of positive psychotic symptoms, so the liaison psychiatry team followed her up. She was diagnosed with an ACTH-secreting lung carcinoid tumor. **Conclusions:** This entity should be taken into account in cases of atypical psychosis in patients with compatible phenotypic characteristics.

Disclosure: No significant relationships. **Keywords:** Cushing's syndrome; cushing; carcinoid; glucocorticoids

EPP0120

Forced Normalization and other neuro-psychiatric manifestations of epilepsy - Case series and A literature review

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Introduction: Psychosis of epilepsy has intrigued many neurologists and psychiatrists. We attempt to summarize the phenomenon, suggested diagnostic criteria and distinguishing features between different clinical entities linked with epilepsy. This case series is unique and rare as we include the case that meets full criteria of forced normalization.

Objectives: 1) To understand the concept and diagnostic criteria of Forced Normalization 2) To differentiate different psychiatric manifestations of epilepsy

Methods: A total of 13 studies were reviewed using the key words from 1999 –2021 using different search engines- Google scholar, Pub-med, Elsevier, Dynamed.

Results: Patients with epilepsy have an eightfold increased risk of psychosis (6). Forced Normalization has been described as the onset of psychotic or mood symptoms after the resolution or remission of >50% of seizures, evidenced by normal EEG. It was first described in 1950's and has been extensively studied since 19thcentury. The age of onset can be 8 years to 71 years of age (mean - 28.3). The exact mechanism is still unknown. Different factors have been linked to this phenomenon like kindling, neurotransmitters etc.

Conclusions: It is interesting to understand the antagonistic relationship between epilepsy and psychosis. Forced normalization is a rare entity because it is hard to diagnose due to possible overlap with other clinical entities like post-ictal or side effects of AED. The

prognosis seems to be favorable depending on the trigger for the symptoms with better prognosis if the resolution of seizures was achieved AED. Mood disorders had worse prognosis than dissociation and psychosis.

Disclosure: No significant relationships.

Keywords: Alternative psychosis; forced normalization; psychosis of epilepsy; epilepsy

EPP0121

Review of gastrointestinal bleeding during use of SSRIs combined with use of NSAID

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doi: 10.1192/j.eurpsy.2022.439

Introduction: In recent years, more and more attention has been paid to the risks of using SSRIs. This group of antidepressants may be associated with an increased risk of gastrointestinal bleeding. This risk would be even further increased with concomitant use of NSAIDs. A number of studies have described this interaction, however they reported conflicting results.

Objectives: Our objective was to investigate the risk of gastrointestinal bleeding with SSRIs, with or without NSAID use.

Methods: We performed a literature search, using Pubmed, EMBASE, and Cochrane library, in order to investigate controlled trials, cohort, case-control and cross-sectional studies that reported the incidence of gastrointestinal bleeding s on SSRIs with or without concurrent NSAID use, compared to placebo or no treatment.

Results: 15 case-control studies and 4 cohort studies were included in the analysis. There was an increased risk of gastrointestinal bleeding with SSRIs in the cohort studies and case-control studies. The risk of gastrointestinal bleeding was even further increased with the combined use of both SSRIs and NSAIDs.

Conclusions: SSRIs are associated with a modest increase of gastro-intestinal bleeding. However, this risk is significantly increased when SSRIs are used in combination with NSAIDs. Psychiatrists should be aware of the hazards in prescribing these medications together.

Disclosure: No significant relationships. **Keywords:** bleeding; SSRIs; NSAID

EPP0122

Transdiagnostic Role of Glutamate and White Matter Damage in Neuropsychiatric Disorders: A Systematic Review

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