

approaches arise for psychiatry. PAT had decided to update the Code of Ethics about two years ago and the updating process is almost on the edge of finalization.

In this presentation, main points of the updated and newly written principles will be summarized with special references to recent developments in the world and updated or newly written international Code of Ethics such as, EPA, WPA, and several national associations' documents.

One of the most important outcome and benefit of such an updating process is modelling the project on a participatory base, having wide feedback and inputs from experts (as many as possible, enriched by diverse interests of related disciplines) and reaching as many colleagues as possible from different working conditions. A six step project with this perspective was prepared and implemented, and will be summarized in the presentation for international exchange of experiences.

Disclosure of Interest: None Declared

SP0039

Epigenetic biomarkers of borderline personality disorder with severe suicidal behaviors

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Abstract: Borderline personality disorder (BPD) is associated with excess suicide risk, natural-cause mortality, comorbid medical conditions, poor health habits and stress related epigenomic alterations. This presentation will report findings of *BDNF* and stress system associated epigenetic alterations in a group of severely impaired BPD and suicidal patients. Further, findings of GrimAge – a state-of-the-art epigenetic age (EA) estimator- in patients with BPD and attempted suicide patients will be presented. Genome-wide methylation patterns were measured using the Illumina Infinum Methylation Epic BeadChip in whole blood from well characterized 97 BPD patients, 88 suicide attempters and 32 healthy controls.

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SP0040

Energy metabolism disturbance, altered neuronal development and glutamatergic signalling in human derived neuronal cell models of ADHD

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Abstract: Despite major advances in research into the neurobiological basis of mental illness, there have been hardly any new developments in new drug therapies. As there are approximately 30% of affected individuals that do not respond sufficiently to available treatments, there is a significant unmet medical need for new therapeutic approaches. About 90% of novel substances that have shown promise in animal studies are not effective in clinical trials. Recent research on human induced pluripotent stem cells (hiPSC) could lead to the use of more human-tailored models in this field. iPSC-derived cell models and organoids may be very attractive for preclinical screening and bridge the gap between in vitro and in vivo studies, reducing animal testing. However, the next steps must first demonstrate the validity and reproducibility of the initial functional results from the hiPSC models of mental illness. In our own studies on neuronal cell models of patients with attention-deficit/hyperactivity disorder (ADHD) with rare PARK2 gene variants, we were able to show evidence of mitochondrial dysfunction and impaired energy metabolism. Additionally, we have first hints at a oxidative dysbalance which could be as well targeted by medication. In a model of cortical development of ADHD patients with common variants in the ADGRL3 gene, we found first evidence for altered neuronal maturation as well as abnormalities in calcium metabolism and glutamatergic functionality compared to cells from healthy controls. In summary, these first results are promising that hiPSC models can contribute new insights into cellular pathomechanisms of mental and neurodevelopmental disorders and the development of new, individualised therapeutic approaches.

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SP0041

Liaison Psychiatry model intervention in Switzerland

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Abstract: Consultation and liaison psychiatry (C-L psychiatry) in Switzerland can look back on a long tradition. It began in French-speaking Switzerland back in the 1960s and gradually spread throughout the country. Currently, C-L services are present throughout the country, although they differ greatly in terms of their services and dimensions. University hospitals and larger cantonal hospitals have extensive and differentiated services, while smaller hospitals in peripheral regions only offer basic services. There are also major differences in the financing models, which are decisive for the range of services offered. The question of funding, which has not yet been resolved satisfactorily despite various models and strategies, including at national level, is highly relevant for the further development and even the continued existence of C-L services. The introduction of the subspecialization in C-L