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Keywords: stress management; university students; online interventions; web based interventions

EPV0469

5-years follow-up of patients with the clinical high-risk state for psychosis

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Introduction: The identification of the psychosis high-risk state in help-seeking patients with depressive symptoms offers the possibility of detection and intervention at the early stages of schizophrenia.

Objectives: Estimating the 5-year follow-up rate of the manifestation of psychosis and levels of functioning in patients with the clinical high-risk state and depressive symptoms.

Methods: 81 inpatients (average age 19.6 years) with depressive symptoms and attenuated psychosis (60 patients with APS and 21 patients with BLIPS). Average duration of inpatient treatment was 56.3 days, antidepressant therapy (mean dosage equivalent to fluoxetine 43.1 mg/day) and antipsychotic therapy (mean dosage equivalent to chlorpromazine 408.9 mg/day) were conducted. All patients were followed up after discharge at least during 5 years (average follow-up 7.1 years). Levels of functioning were assessed on the PSP scale.

Results: The manifestation of psychosis was identified in 21.0% (17 patients) (on average in the third year of follow-up), complete symptomatic and functional remission was established in 11.1% (9 patients) (PSP 100-81), complete symptomatic and incomplete functional remission was established in 27.2% (22 patients) (PSP 80-61). Incomplete symptomatic and incomplete functional remission – in 24.7% (20 patients) (PSP 60-41) and 13.5% (11 patients) (PSP<40).

Conclusions: The combination of antidepressants and antipsychotics therapy in patients with the clinical high-risk state for psychosis reduced the risk of psychosis manifestation but did not significantly affect the level of outcome compared to other studies.

Disclosure: No significant relationships.

Keywords: high risk psychosis; early intervention; youth depression; attenuated positive symptoms

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Indicators of psychomotor development of premature infants by perinatal CNS lesion

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Introduction: The birth premature babies with hypoxic-ischemic damage to the neutral system with the subsequent development of hypoxic encephalopathy (HIE). Monitoring of the mental development and neurological status of such prematurely born children is carried out taking into account the corrected age and traditional scales.

Objectives: To compare indicators of psychomotor development in preterm infants (gestational age < 32 weeks) with and without hypoxic-ischemic encephalopathy.

Methods: A prospective study was carried out in the neurological department. The study included data from infants with a gestational age of < 32 weeks of gestation. Scale score immediately after birth and at corrected ages in the first, third and sixth months of life (data analysis according to Griffiths Scales).

Results: Data from 95 newborns were eligible for conclusion. Of these, 67 children took part in the study, 32,8% of them were diagnosed with hypoxic-ischemic encephalopathy. In newborns with HIE gestational age at birth was less so they received parenteral nutrition for a longer time, the body weight gained during the hospital stay was less, they needed more time to switch to enteral nutrition. And only at the 3rd (80% of children) and 6th months of life, there were no statistically significant differences in psychomotor development between groups with and without hypoxic-ischemic encephalopathy.

Conclusions: In this study, it was shown that in premature infants with hypoxic-ischemic encephalopathy, normal indicators of psychomotor development and neurological status were restored at the corrected age only by 6 months of age.

Disclosure: No significant relationships.

Keywords: premature infants; hypoxic-ischemic damage; psychomotor development

EPV0471

An unbalanced time-perspective profile in cardiac surgery patients as a risk factor for depression

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Introduction: Depression is one of common comorbid states that accompany cardiovascular diseases. Risk of co-morbidity can rise when patients have to undergo heart surgery, which is an additional stress-factor.

Objectives: To specify psychological correlations between depressive manifestations in cardiac surgery patients based on the analysis of their time perspective profile.

Methods: Using the Zimbardo Time Perspective Inventory, we examined 60 cardiac surgery inpatients (80% male, mean age 58.25±10.55). We calculated the statistical estimation of the received data based on the comparison with the norm and the correlation analysis.