

S0102

Food addiction and gender aspects: Risk factors, co-morbidities and treatment

E. Sönmez Güngör

Psychiatry, Erenköy Mental Health and Neurological Diseases Training and Research Hospital, Istanbul, Türkiye
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Abstract: Food addiction (FA) is characterized by poorly controlled intake of highly-palatable, calorically-dense, high-sugar, high-fat, and usually processed foods. Although not existing in the DSM-5 or ICD, it has been a widely discussed clinical and research entity for more than a decade, in the understanding of both obesity and also disordered eating behaviours. Most studies indicate that risk factors for FA are similar to substance use disorders. FA is also found to be linked with emotion regulation problems, impulsivity, distinct personality features, and other major psychopathologies including depression and anxiety. Moreover, in several studies, female gender is found to be associated with more prevalent food addiction, up to 7 times. Female gender is also a predictor of severe food addiction, and high reward sensitivity was significantly associated with more severe FA symptoms in females. It is known that women are more likely to self-medicate than men in the acquisition phase of addiction and show a more rapid escalation of use than men (telescoping), whereas in general substance use disorders are much more common in men. The wide availability of hyperpalatable, high-calorie, and inexpensive food and the contextual and social factors that do not necessarily prevent women from consuming these drugs, contrary to that of illicit drugs, might explain why FA is more frequently observed in women than in men. Also, biological factors, hormonal changes and body-image disturbances might also be among the reasons why females are more affected from FA. Aspects related to gender should be taken into account for proper recognition and treatment of FA, a diagnosis of growing importance.

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S0100

Mental pain and suicide risk: implications for neuroimaging

M. Pompili

Sapienza University of Rome, Rome, Italy
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Abstract: Campaigns have been launched to make sense of what makes a specific individual suicidal. We know that suicidal individuals give definite warning signs, mainly from their ambivalence about ending their own lives. Classical suicidology posited that the suicidal individual experiences unbearable psychological pain (*psychache*) or suffering and that suicide might be, at least in part, an attempt to escape from this suffering, emphasizing that suicide is not a movement toward death but rather an escape from unbearable emotion and unendurable or unacceptable anguish. Suicide occurs when that individual deems the *psychache* to be unbearable. Neuroimaging studies demonstrated that such emotional pain shares the same neuroanatomical circuit of somatic pain. Furthermore, concepts related to death, failure, or other unfortunate circumstances activate specific cerebral areas in a suicidal individual

compared to a non-suicidal subject. The author conducted a sizeable clinical investigation on mental pain related to psychiatric disorders and suicide risk. Implications for further research are discussed during the presentation.

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S0101

Post-migration trajectories and psychopathological vulnerability

I. Tarricone* and Ilaria Tarricone, Giuseppe D'Andrea, Hannah E Jongtsma, Sarah Tosato, Charlotte Gayer-Anderson, Simona A. Stilo, Federico Suprani, Conrad Iyegbe, Els van der Ven, Diego Quattrone, Marta di Forti, Eva Velthorst, Paulo Rossi Menezes, Celso Arango, Mara Parel

Department of Medical and Surgical Sciences, Bologna University, Bologna, Italy

*Corresponding author.

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Abstract: Background: Psychosis rates are higher among some migrant groups. We hypothesized that psychosis in migrants is associated with cumulative social disadvantage during different phases of migration.

Methods: We used data from the European Network of National Schizophrenia Networks studying Gene-Environment Interactions (EU-GEI) case-control study. We defined a set of 3 indicators of social disadvantage for each phase: pre-migration, migration, and post-migration.

Results: 249 cases and 219 controls were assessed. Pre-migration (OR 1.61, 95%CI 1.06-2.44, $p=0.027$) and postmigration social disadvantages (OR 1.89, 95%CI 1.02-3.51, $p=0.044$), along with expectations/achievements mismatch (OR 1.14, 95%CI 1.03-1.26, $p=0.014$) were all significantly associated with psychosis. We found a dose-response effect between number of adversities across all phases and odds of psychosis (≥ 6 : OR 14.09, 95%CI 2.06-96.47, $p=0.007$).

Conclusions: The cumulative effect of social disadvantages before, during and after migration was associated with increased odds of psychosis in migrants, independently of ethnicity or length of stay in the country of arrival. Public health initiatives that address the social disadvantages that many migrants face during the whole migration process and post-migration psychological support may reduce the excess of psychosis in migrants.

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S0102

Positive and negative correlates of social media use, including aggression, trauma and suicide

E. Sönmez Güngör

Psychiatry, Erenköy Mental Health and Neurological Diseases Training and Research Hospital, Istanbul, Türkiye
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Abstract: In the past two decades, social media has become the central way for many people, organizations, institutions to communicate and share opinions, ideas, and information. A young individual on average spends 2-3 hours on social media, engaging in 6-7 applications, which has also dramatically increased during/and after the pandemic. So far, there has been increasing evidence that social media influences behavior, including its own use. It has also been related with aggression towards self and others, and especially suicidal behaviour related (positively and negatively) with social media use has received growing academic and public interest. Excessive use of social media or addiction, exposure to negative content, stalking, cyberbullying and cybervictimization are among concepts which have an influence on (self-)aggressive behavior. Research has shown that adolescents are more vulnerable to cybervictimization than adults, and female adolescents, who spend more time on social media than males, are even more vulnerable, resulting in depressive and in some cases, suicidal ideation. Individuals in marginalized groups might also be more prone to be affected by excluding discourse or discriminatory posts. On the other hand, social media could serve as a coping mechanism given the possibilities for instant support from online networks, availability of psychoeducational resources and mental health related scientific content. Few meta-analyses in the field indicate the need to systematize sampling and data collection; while each pointing to the heterogeneity of the impact of social media. In this talk, the correlates of social media will be reviewed, and possible mental health-promoting approaches will be discussed.

Disclosure of Interest: None Declared

S0103

Online Behavioral Addictions in 2023: An Overview and Current Considerations

M. N. Potenza

Yale School of Medicine, New Haven, United States
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Abstract: Introduction: Behavioral addictions (with related behaviors often conducted online) constitute new categories within the Diagnostic and Statistical Manual (DSM) and International Classification of Diseases (ICD). In both, gambling disorder is listed as a formal clinical diagnosis whereas disorders related to videogaming exist in the DSM (research criteria) and ICD (clinical criteria). However, a broader range of disorders related to other behaviors (e.g., shopping/buying, social media use, pornography use) have been proposed as possible behavioral addictions.

Objectives: This presentation will provide insight in efforts by major organizations (e.g., the World Health Organization) to consider behavioral addictions and how best to screen for, assess and intervene to help people with these conditions. Empirical data influencing the classification of the behaviors and disorders will be presented. Changes in online behaviors during the COVID-19 pandemic will be considered with respect to mental health concerns.

Methods: Multiple methods ranging from results of neuroimaging studies, clinical trials, and longitudinal investigations will be presented.

Results: Brain imaging results suggest similarities between specific internet-use behaviors (especially internet gaming disorder) and substance use disorders, supporting a classification as behavioral

addictions. Multiple types of internet use increased during the pandemic, particularly during the onset. Different patterns of mental concerns in relation to internet use behaviors were seen during the pandemic. Consensus guidances regarding how best to avoid and address problematic use of the internet were developed and disseminated. Clinical trials support the efficacy of behavioral and neuromodulatory approaches, although no treatments have regulatory approval for behavioral addictions.

Conclusions: Multiple internet-use behaviors may form the basis of behavioral addictions. While considerable data exist for internet gaming disorder, other behaviors commonly performed on the internet also warrant consideration. Additional research is needed to develop, test and implement more effective prevention and treatment strategies.

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S0104

The prefrontal cortex: a region of interest in suicidal behaviour

E. Olie

CHU Montpellier, Montpellier, France
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Abstract: Some evidence converges to consider that suicidal behaviour could be a separate diagnosis and emphasizes the relevance to identify specific biomarkers. Identifying the neural substrates of suicide attempt is key to understanding the etiology of suicide and might be helpful in reducing suicide rates among psychiatric patients by promoting the development of novel therapeutic strategies based on behavioral neuroscience and brain stimulation. Neuroimaging studies have reported structural and functional brain abnormalities located in the prefrontal cortex, insula and striatal regions as well as in the connections between these brain areas. Based on task related and resting state functional MRI studies, we will discuss original data showing the role of the ventral prefrontal cortex in suicide vulnerability.

Disclosure of Interest: None Declared

S0105

Mental health and addiction in young refugees- Research on prevalence of alcohol and substance use, PTSD and psychological difficulties experienced by young migrants and refugees placed in two refugee centers in Serbia in the time of COVID-19 pandemic

J. Vasic* and

Roberto Grujicic, Oliver Toskovic, Milica Pejovic Milovancevic

Institute of Mental Health, Belgrade, Serbia

*Corresponding author.

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Abstract: Introduction: As the global resettlement needs are further increasing, the questions on refugee youths' wellbeing arise. The experience of migration during childhood might interfere with the developmental trajectories in different ways. Refugee youths might be at higher risk of violence, abuse and mental health problems.