Institute, Tomsk National Research Medical Center, Russian Academy of Sciences, Tomsk, Russian Federation
*Corresponding author.

Introduction: The relevance of studying the characteristics of the home environment of a person with mental health problems is determined by the need to identify the resources of the individual and the family to form multilevel adaptive competencies aimed at maintaining mental health.

Objectives: The present study was conducted to obtain standardized assessments of attitudes towards the home environment, towards the home as a place of functioning of the family with mental patients.

Methods: The study involved 12 patients aged 21-60 years diagnosed according to ICD-10 F2 with the disease duration of more than 1 year and readmission. Methods used were experimental psychological questionnaire "My home" (Reznichenko, Nartova-Bochaver, Kuznetsova, 2016), mathematical statistics

Results: The test results showed that the average score for the "strength of significance of the home for its inhabitants" across the data set was 4.14, which differed from the average value of 3.73.

Conclusions: The psychological foundations of attachment can be associated with a variety of facts, including the frequent absence of patients outside the home environment during readmission periods. The home environment can be a complex of positive feelings and experiences in relation to the home as a personally significant place. The study revealed some of the psychological traits of the subjective attitude to home, which can become indicators of psychological adaptation in persons with mental disorders in the future. Reznichenko S.I., Nartova-Bochaver S.K., Kuznetsova V.B. (2016) Home Attachment Assessment Method. Psychology. Journal of the Higher School of Economics. 13(3): 498-518.

Disclosure: No significant relationships.
Keywords: family; mental patients; readmission

O218

Does maternal age or related factors influence the appearance of psychopathology in children?

J. Buesa Lorenzo[1]*, A. García-Blanco[2], A. Moreno-Giménez[2], L. Campos Berga[1], R. Sahuquillo-Leal[2], A. Nowak[3], D. Hervás[4], V. Diago[5] and M. Vento[2]

[1]Psychiatry, University and Polytechnic Hospital La Fe, Valencia, Spain; [2]Neonatal Research Group, The Medical Research Institute Hospital La Fe (IIS La Fe), Valencia, Spain; [3]Psychiatry, Adam Mickiewicz University, Poznań, Poland; [4]Data Science Unit, Biostatistics, And Bioinformatics, The Medical Research Institute Hospital La Fe (IIS La Fe), Valencia, Spain and [5]Gynaecology And Obstetrics, University and Polytechnic Hospital La Fe, Valencia, Spain
*Corresponding author.

Introduction: Maternal age and related factors, such as social vulnerability, are associated with neurodevelopmental and behavioral disorders in offspring.

Objectives: To examine the influence of maternal age and its related factors on the appearance of autism spectrum disorder (ASD), attention deficit hyperactivity disorder (ADHD), alterations in executive functions and behavioral syndromes of the offspring.

Methods: A prospective study was conducted, consisting of 131 healthy pregnant women aged 20 to 41 years, recruited at 38 weeks' gestation. Their offspring were followed up to 2 years after birth, when psychopathology was assessed. Maternal age and possible related factors were considered predictors. Bayesian ordinal regression models were performed for each outcome variable.

Results: Symptoms of ASD in children were associated with an older maternal age (OR = 0.188; 95% CI[1.062, 1.401]) and a lower educational level of the parents (OR = -0.879; 95% CI[0.202, 0.832]), meanwhile poor social support predicted most ADHD symptoms OR = -0.086; 95% CI[0.838, 1]) and executive dysfunctions OR = -0.661; 95% CI[0.313, 0.845]. Lower parental education predicted both externalizing and internalizing behavior.

Conclusions: Maternal age-related factors were the main predictors of neurodevelopmental disorders in offspring, rather than maternal age. The performance of prenatal interventions in pregnant women with advanced age and anxious depressive symptoms or adverse social situation, is crucial to reduce the risk of neurodevelopmental disorders in the offspring. Likewise, being able to carry out an early detection of childhood psychopathology would allow the implementation of resources that improve their long-term prognosis.

Disclosure: No significant relationships.
Keywords: predictor; PSYCHOPATHOLOGY; maternal age

O219

The development of depressive symptomatology, burnout and lifestyle in the Czech population – in years 2014-2020

M. Vňuková* and R. Ptáček

Psychiatry, First Faculty of Medicine Charles University in Prague and General Teaching Hospital, Prague, Czech Republic
*Corresponding author.

Introduction: It is clear from the literature that depressive disorder is closely related to lifestyle, however the relationship between burnout and lifestyle remains unclear.

Objectives: The aim of this study was to present a comprehensive overview of depressive symptoms, burnout and lifestyle over the years. Furthermore, this study looks at the relationship between burnout, depressive symptomatology and lifestyle and seeks to clarify the extent to which burnout can be explained by these variables.

Methods: Data collection took place in three waves. The first data collection was in 2014 (October/November), the second in 2017 (March) and the third in 2020 (March). The STEM/MARK agency conducted the data collection and collected answers from a representative sample of respondents using the CAWI method - computer-assisted questioning. These respondents were selected from the European National Panel. Because the target group was adults (18-65 years), an online survey was chosen. Internet penetration in this target population is sufficient and it was not necessary to use a combination of methodologies.

Results: All 3 data collections identically show that for the model explaining burnout statistically significant variables are: age, depression and fatigue during the day. Other variables related to healthy lifestyles did not reach statistical significance.

Conclusions: Even though the variables regarding healthy lifestyles have not reached statistical significance, their importance should not be underestimated. Mental well-being is closely linked to physical health and therefore a holistic approach to health should be emphasized and the rate of burnout should be regularly monitored.

Disclosure: No significant relationships.
Keywords: depressive symptomatology; burnout; lifestyle; SMBM

O221

Psychopathological and psychosocial factors influencing physical health of people with mental disorders

F. Zinno[1*], C. Palummo[1], L. Giannelli[1,2], A. Pitocco[1], A. Carello[1,2], E. Barone[1,3], V. Giallonardo[1,2], G. Sampogna[1], M. Luciano[1], V. Del Vecchio[1] and A. Fiorillo[4]

[1]Department Of Psychiatry, University of Campania "Luigi Vanvitelli", Naples, Italy; [2]Department Of Pschiatry, University of Campania "Luigi Vanvitelli", Naples, Italy; [3]Department Of Psychiatry, University of Campania "Luigi Vanvitelli", Napoli, Italy and [4]Department Of Psychiatry, University of Campania, Naples, Italy
*Corresponding author.
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Introduction: Severe mental disorders (SMD) are associated with higher morbidity rates and poorer health outcomes compared to the general population. They are more likely to be overweight, to be affected by cardiovascular diseases, and to have higher risk factors for chronic diseases.
Objectives: To assess physical health in a sample of patients with SMD and to investigate which mental health-related factors and other psychosocial outcomes could be considered predictors of poor physical health.
Methods: Patients referring to the psychiatric outpatients unit of the University of Campania "L. Vanvitelli" were recruited, and were assessed through validated assessment instruments exploring psychopathological status, global functioning and stigma. Physical health was assessed with an ad-hoc anthropometric schedule. A blood sample has been collected to assess levels of cholesterol, blood glucose, triglycerides, and blood insulin.
Results: 75 patients have been recruited, with a mean age of 45.63 ± 11.84 years. 30% of the sample had a diagnosis of psychosis, 27% of depression and 43% of bipolar disorder. A higher BMI is predicted by higher number of hospitalizations, a reduced score at MANSA ($p<.000$), and PSP ($p<.05$), and higher score at ISMI and BPRS ($p<.05$). A higher cardiovascular risk is predicted by a reduced MANSA score ($p<.000$), a higher ISMI score and a poorer adherence to pharmacological treatments ($p<.05$). Higher ISMI score ($p<.0001$) and number of hospitalizations ($p<.05$) are predictors of insulin-resistance.
Conclusions: Our study shows that psychosocial domains negatively influence physical health outcome. It is necessary to disseminate an integrated psychosocial intervention in order to improve patients' physical health.

Disclosure: No significant relationships.
Keywords: Stigma; Mental disorders; Physical health; chronic diseases

Psychoneuroimmunology

O222

Pro-inflammatory cytokine alterations in unaffected first-degree relatives of schizophrenia patients

A. Kurtulmus[1,2*]

[1]Psychiatry, Istanbul Medeniyet University Goztepe Research and Training Hospital, Istanbul, Turkey and [2]Psychiatry, Bezmialem Vakif University, Istanbul, Turkey
*Corresponding author.
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Introduction: A growing body of evidence in both chronic and first-episode schizophrenia report increased expression of pro-inflammatory substances in the blood and cerebrospinal fluid of patients. However, there is not much data in the literature on immune alterations in unaffected first-degree relatives (FDRs) of the patients.
Objectives: We aimed to evaluate inflammatory aberrancies in patients with schizophrenia, their unaffected first-degree relatives (FDRs) and healthy controls.
Methods: 50 chronic, stable schizophrenia patients, 42 FDRs and 40 healthy subjects with no family history (HCSs) were recruited to the study. IL-1β, IL-6, TNF-a and CRP levels were measured. Complete blood counts, fasting glucose and lipid levels were analyzed and neutrofil-lymohocyte ratio (NLR) were calculated.
Results: There was a significant group difference in all cytokine levels after controlling for age, gender, smoking status, comorbid medical diseases, BMI and blood glucose and tyrigliseride levels ($p<.001$). FDRs showed significantly higher serum levels of cytokines than HCs, in the same way as the corresponding schizophrenia patients but a lower level. Pairwise comparisions revealed that the differences were significant between each group after controlling for confounders ($p<.001$ for all comparisons). However, NLR and CRP levels were not different between groups.
Conclusions: Our results support the role of inflammatory aberrancies in the pathophysiology of schizophrenia. The finding of abnormal cytokine levels both in schizophrenic patients and FDRs indicates that such immunological alterations are not exclusive to the patients and can be possible endophenotypes for the disorder.

Disclosure: No significant relationships.
Keywords: endophenotype; cytokines; schizophrénia

O223

Hyperbaric oxygenation of autoimmune manifestation in coversational disorders

D. Labunskiy*, S. Kiryukhina, V. Podsevatkin, E. Govsh and V. Kolmyykov

Neurology And Psychiatry, Ogarev Mordovia State University, Saransk, Russian Federation
*Corresponding author.
doi: 10.1192/j.eurpsy.2021.404

Introduction: Study of conversion disorders is urgent problem in psychiatry due to high prevalence of hysterical manifestations, both