

Abstract: Microdosing psychedelics has garnered considerable attention within both nonprofessional circles and the scientific community in recent years. This method involves taking small, non-hallucinogenic doses of substances like LSD or psilocybin over weeks or months, purportedly to enhance specific behaviors, emotions, or address psychiatric conditions.

Exploring these assertions is crucial given the potential therapeutic value of microdosing, especially in conditions that respond positively to full psychedelic doses, such as depression. The full psychedelic experience might not always be suitable due to various factors like age, capacity to consent or comprehend the experience (e.g., dementia), or individual personality traits that might hinder surrendering to the experience. Microdosing could potentially serve as a maintenance therapy post-full dose administration, aiding specific psychological or biological processes during therapy or therapeutic exercises.

Recent studies in healthy individuals highlight that small psychedelic doses have nuanced effects on pain perception, mood, neuroplasticity, sleep duration, brain connectivity, and default mode network synchronicity. However, some parameters show null effects after both single and repeated administration.

Our survey research uncovered that individuals with ADHD reported symptom relief through microdosing, deeming it more effective than their conventional treatments. Subsequently, we conducted a naturalistic study following individuals with ADHD across a 4-week microdosing period. Our findings indicated a reduction in symptoms over time, an increase in trait mindfulness, and a decrease in neuroticism compared to baseline. While these results are intriguing, they necessitate validation in a clinical trial. We have recently concluded such a trial and are currently analyzing the data to further explore these effects.

Disclosure of Interest: K. Kuypers Grant / Research support from: The author is a principal investigator on a research project that is sponsored by Mindmed, a company that is developing psychedelic medicines.

CRS0004

Easy access to youth mental health services in the Netherlands

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doi: 10.1192/j.eurpsy.2024.45

Abstract: Mental health problems have increased following the pandemic and are associated with considerable health, economic and societal outcomes, particularly affecting youth. In co-creation with young people several European prevention and early intervention strategies to promote mental wellbeing of youth are currently being developed. The development and implementation of easy-access youth mental services across Europe will be presented and discussed. In addition pilot data of online, hybrid treatment platforms and self-management ecological momentary intervention apps will be presented. Ultimately the aim is: 1) to develop clinical guidelines, best practices, and policy recommendations to

mitigate the youth mental health challenges and 2) improve (cost-) effectiveness of early intervention strategies for promotion and prevention in mental health, including enhancing mental health literacy, resilience and self-management, while 3) actively involving young people in the process of these innovative developments. To amplify the reach, campaigns designed in co-creation with young people, to increase awareness, literacy, wellbeing and help-seeking among young people, targeting schools, further-education colleges, universities and other specific settings will need to be developed, specifically paying attention to high-risk groups within this young population, including children of parents with mental disorders, migrants, young people growing up in poverty, those in/leaving care, and the LGBTQ+ community, with coordination across domains: schools, general practitioners, and specialized mental healthcare facilities.

Disclosure of Interest: None Declared

CRS0005

Changes in brain structure and function in youth at familial risk for schizophrenia or bipolar disorder: implications for early intervention

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doi: 10.1192/j.eurpsy.2024.46

Abstract: The evaluation of child and adolescent offspring of patients with schizophrenia or bipolar disorder seeks to understand changes taking place in the brain in individuals at heightened risk for disease during a key developmental period. In this session I will present findings from the BASYS (Bipolar And Schizophrenia Young offspring Study) cohort, which has recruited young offspring of patients with schizophrenia or bipolar disorder ages 6 to 17 years, using clinical, cognitive and brain imaging measures for over 15 years in Spain. I will begin by reviewing our baseline and 2 year findings using structural magnetic resonance imaging (MRI) measures, where we found whole brain and regional cortical grey matter volume and surface area reductions, specifically in offspring of patients with schizophrenia relative to controls, but not in offspring of patients with bipolar disorder, which I will compare with results from the ENIGMA relatives working group analyses. Within our cohort I will explain the relevance of baseline brain structural findings to clinical and cognitive outcome over time. I will then present longitudinal analyses of structural and functional MRI measures at up to 8 year follow-up, examining the influence of development of psychotic spectrum symptoms over time and cognitive and functional outcomes, on longitudinal brain imaging measures. I will finish the talk explaining avenues for future research in the field, which include incorporating other imaging modalities and validating our findings in other cohorts, while I will also present avenues for increasing understanding of the neurobiological changes underpinning our MRI findings.