type I at the age of 16 when she experienced her first manic episode in her country of origin. Subsequently, during her first pregnancy, she required hospitalization for electroconvulsive therapy (ECT) treatment, with a positive response after a single session. She remained stable for several years without maintenance pharmacological treatment or follow-up until the ninth week of her second pregnancy when she experienced a manic episode requiring hospitalization.

Results: She was initially treated with Olanzapine and Lorazepam with a positive response, but three weeks later, she was readmitted with a similar episode. These decompensations occurred almost monthly, leading to the consideration of introducing mood stabilizers after the first trimester. However, due to the patient's severe hyperemesis gravidarum, this stabilizing treatment was ruled out due to the difficulty in controlling its blood levels and the associated risk of intoxication. During the fifth admission at the 20th week of gestation, the decision was made to initiate ECT treatment, which yielded an excellent response and subsequent maintenance.

Conclusions: The indications for electroconvulsive therapy (ECT) during pregnancy are the same as in the rest of adult patients. In individuals with a psychiatric history, it is possible for a relapse of mental illness to occur during pregnancy, although the risk is considerably higher during the postpartum period. ECT is considered an effective and safe treatment option in all three trimesters of pregnancy and the postpartum period. During the informed consent process, patients should be informed about the potential impact of ECT as well as alternative treatment options.

Disclosure of Interest: None Declared

EPP0038

The impact of hormones on emotional and social development: a study in adolescent daughters of women with polycystic ovary syndrome

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doi: 10.1192/j.eurpsy.2024.275

Introduction: Polycystic Ovarian Syndrome (PCOS) is the most prevalent endocrine disorder in adolescents. It affects brain maturation, specially in highly neuronal plasticity periods However, there is a lack of information about the impact of this exposure during brain plasticity windows.

Objectives: Characterize the consequences of hyperandrogenism in emotional status and social cognition (SC) on adolescents daughters of women with PCOS (dPCOS).

Methods: Analytical cross sectional study. dPCOS and controls between ages of 12 to 25 years old were recruited. Participants underwent a complete clinical evaluation, plasmatic hormones determinations (including total testosterone, SHBG, androstenedione and 17-OH-progesterone) and ovarian ultrasound characterization. SC was estimated by: measurements of affects (PANAS), strength and difficulties (SDQ), self-reported empathy (EQ/SQ and AQ), and gaze patterns for autonomic response measurement via Eye-Tracking.

Results: 33 participants were recruited, 15 cases and 18 controls. Median age was 17 and 18 years, respectively. The dPCOS presented a larger anogenital distance (cm) (9.7 vs 7.8; p=0.014), Ferryman-Gallwey score mean (13.0 vs 2.0; p=<0.001) and free androgen index value (7.5 vs 4.1; p=0.004), suggesting hyperandrogenism exposure during intrauterine and adolescence periods. Regarding SC, dPCOS exhibited a predominantly negative affective status (PANAS 8.0 vs 2.0, p=0.049) and a higher score in socioemotional problems (SDQ 2,5 vs 1,5; p=0,047). The eye-tracking registration showed that dPCOS presentes longer time to first fixation in areas of interest (s) (0,35 vs 0,28; p=0,037), which was associated with a worse endpoint in emotional recognition (aR2=-0,920; f=19,48; Pr >|t|=<0,049). Furthermore, the 2D:4D ratio (intrauterine marker of androgen exposure) was correlated with a predominance of negative affect (rho=0,51; p=0,019) and less prosocial behaviors (coef=-2,39; P>|t|=0,049).

Conclusions: Clinical and hormonal markers suggest that dPCOS are exposed to hyperandrogenism during the most critical neuroplasticity periods. This exposure is associated with negative affects, more social-emotional difficulties and less score on emotional recognition and prosocial behavior. Due to a high psychiatric comorbidity in PCOS patients, these findings are relevant and emphasize the importance of early mental health treatment in these patients.

Disclosure of Interest: None Declared

EPP0040

Diversity and gender at the largest European university hospital: The effects of discrimination on mental health

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doi: 10.1192/j.eurpsy.2024.276

Introduction: Discrimination is known to have different effects on health. In particular the mental health of affected people diminishes. Although it is known that marginalized groups are discriminated against more, at present only research on gender and ethnicity has been done. Further diversity domains like socioeconomic status, care responsibilities, sexual orientation, disability, mental and physical health, and their intersections have been scarcely looked at.

Objectives: The aim of the study was to determine the effects of discrimination on the mental health for employees and students of a university hospital taking diversity domains into account.

Methods: A web-based survey between June 22 to October 23 was conducted using the PHQ-4 and WHO-5 as well as innovative Diversity Minimal Item set to measure different diversity domains.

Results: Preliminary data shows that discrimination among employees and students is common, widespread and most frequent