

EPV0099

Clinical validation of EDIT-B test for the diagnosis of bipolar disorder

J.-D. Abraham^{1*}, N. Salvetat¹, P. Guerra², M. Ferrari³, P. Le Guen⁴, O. Biglia⁵, C. Henry⁶, L. Kessing⁷, J.M. Haro⁸, E. Vieta⁹ and D. Weissmann¹

¹Alcediag/Sys2Diag, Neurology, Montpellier, France; ²Product Life Group, Plg, Suresnes, France; ³Synlab, Italy, Monza, Italy; ⁴Aixial, France, Boulogne-Billancourt, France; ⁵Veracyte, Luminy Biotech Entreprises, Marseille, France; ⁶Institut Pasteur, Unité Perception Et Mémoire, Paris, France; ⁷The Copenhagen Affective Disorder Research Center, Rigshospitalet, Copenhagen, Denmark; ⁸Parc Sanitari Sant Joan de Déu, Fundació Sant Joan De Déu, Cibersam, Barcelona, Spain and ⁹University of Barcelona, Hospital Clinic, Barcelona, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2022.1047

Introduction: Bipolar disorder (BD) is a psychiatric disorder characterized by alternating episodes of high mood and low mood similar to depression. To differentiate BD patients from unipolar (UN) depressed patients remains a challenge and the clinical scales available failed to distinguish these 2 populations. ALCEDIAG developed EDIT-B, the first blood test able to make a differential diagnosis of BD. Based on RNA editing modifications measurement and AI, the test requires a simple blood draw and equipment available in most central laboratories. A first study on 160 UN and 95 BD patients allowed a differential diagnosis with an AUC of 0.935 and high specificity (Sp=84.6%) and sensitivity (Se=90.9%). A multicentric clinical study has been set up to validate these performances.

Objectives: The objective of this project is to run a multicentric clinical study in Europe and assess the performances of the test.

Methods: The EDIT-B project, led by Alcediag, is supported by EIT-Health grant (European institute of Innovation and Technology) and gathers 4 clinical centers in 3 countries (France, Spain, Denmark), a CRO for the clinical study management (Aixial), a CRO for the development of a diagnostic kit (Veracyte), a diagnostic lab for molecular biology analyses (Synlab), and a regulatory company (PLG).

Results: At the end of the study, the EDIT-B performance will be confirmed and the test will be CE-marked.

Conclusions: This test will address the needs of millions of patients suffering from misdiagnosis and therefore allow them to receive the correct treatment.

Disclosure: JDA, NS and DW are employees of Alcediag.

Keywords: bipolar disorder; diagnostic; clinical study; epigenetics

EPV0098

Treatment-resistant Bipolar Disorder and Thyroid Cancer

H. Jemli^{1*}, U. Ouali², A. Aissa², Y. Zgueb² and R. Jomli²

¹University of tunis elmanar, Faculty Of Medicine Of Tunis, manouba, Tunisia and ²Razi Hospital, Psychiatry A, manouba, Tunisia

*Corresponding author.

doi: 10.1192/j.eurpsy.2022.1048

Introduction: Bipolar disorder (BD) is a chronic and recurrent illness frequently associated with functional deterioration and

treatment challenges. High rates of thyroid dysfunction have been found in patients with BD, compared to the general population.

Objectives: To illustrate through a case-report the therapeutic challenges of treatment-resistant bipolar disorder and its relationship with thyroid dysfunction.

Methods: Case report of a 41-year-old male patient with BD and comorbid anxiety disorders who has been diagnosed with thyroid cancer and underwent total thyroidectomy.

Results: Mr B is a 41 year old patient diagnosed with BD and comorbid anxiety disorders (panic disorder, social anxiety disorder and generalized anxiety disorder) at age 18. He has presented in total 17 relapses and was hospitalized 7 times between the ages of 18 and 24. He experienced predominantly major depressive episodes with mixed features and debilitating anxiety symptoms. He was put on several treatments including a combination of mood stabilizers, antidepressants and benzodiazepines. Due to unsatisfactory treatment response, he was put on clozapine 150mg to 175mg/d combined with valproic acid, clonazepam. In 2009, the patient developed a nodular goiter caused by papillary thyroid carcinoma and underwent total thyroidectomy and radioactive iodine therapy. Following the surgical operation and stabilization of thyroid functioning, a decrease in the number of relapses and the severity of mood and anxiety symptoms have been noted.

Conclusions: This case reports highlights the importance of thyroid function assessment in patients with bipolar disorder and the possible correlation to treatment resistance and symptom severity.

Disclosure: No significant relationships.

Keywords: bipolar disorders; thyroid function; resistance; Anxiety disorders

EPV0099

The Effects of Emotional Dysregulation and Impulsivity on Suicidality in Patients with Bipolar Disorder

F. Kulacaoglu^{1*} and F. Izci²

¹Istanbul Bakirkoy Prof. Dr. Mazhar Osman Research and Training hospital for mental health and neurological diseases, Psychiatry, Istanbul, Turkey and ²Istanbul Erenkoy Training and Research Hospital for Psychiatry and Neurological Diseases, Psychiatry, Istanbul, Turkey

*Corresponding author.

doi: 10.1192/j.eurpsy.2022.1049

Introduction: Bipolar disorder (BD) is a prevalent, often severe, and disabling illness that affects about 1-5% of the general population and has the highest risk of suicide among psychiatric disorders. Impulsivity and emotion dysregulation have been emphasized due to their role in facilitating suicide acts among those with suicide ideation.

Objectives: This study aimed to examine the relationship between emotional dysregulation, impulsivity, and suicidality in patients with bipolar disorder by comparing bipolar patients with healthy individuals

Methods: The study included 85 patients (59 women, 26 men) with bipolar disorder and education and age-matched 65 (44 women, 21 men) healthy volunteers. The patient group was divided into 3 subgroups according to have suicide attempt history, have suicide ideation without attempt, and have neither suicide attempt nor ideation. Sociodemographic Form, The Difficulties in Emotion Regulation Scale (DERS), Barratt Impulsivity Scale (BIS-11), Scale