

**Disclosure:** No significant relationships.

**Keywords:** stress management; university students; online interventions; web based interventions

## EPV0469

### 5-years follow-up of patients with the clinical high-risk state for psychosis

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**Introduction:** The identification of the psychosis high-risk state in help-seeking patients with depressive symptoms offers the possibility of detection and intervention at the early stages of schizophrenia.

**Objectives:** Estimating the 5-year follow-up rate of the manifestation of psychosis and levels of functioning in patients with the clinical high-risk state and depressive symptoms.

**Methods:** 81 inpatients (average age 19.6 years) with depressive symptoms and attenuated psychosis (60 patients with APS and 21 patients with BLIPS). Average duration of inpatient treatment was 56.3 days, antidepressant therapy (mean dosage equivalent to fluoxetine 43.1 mg/day) and antipsychotic therapy (mean dosage equivalent to chlorpromazine 408.9 mg/day) were conducted. All patients were followed up after discharge at least during 5 years (average follow-up 7.1 years). Levels of functioning were assessed on the PSP scale.

**Results:** The manifestation of psychosis was identified in 21.0% (17 patients) (on average in the third year of follow-up), complete symptomatic and functional remission was established in 11.1% (9 patients) (PSP 100-81), complete symptomatic and incomplete functional remission was established in 27.2% (22 patients) (PSP 80-61). Incomplete symptomatic and incomplete functional remission – in 24.7% (20 patients) (PSP 60-41) and 13.5% (11 patients) (PSP<40).

**Conclusions:** The combination of antidepressants and antipsychotics therapy in patients with the clinical high-risk state for psychosis reduced the risk of psychosis manifestation but did not significantly affect the level of outcome compared to other studies.

**Disclosure:** No significant relationships.

**Keywords:** high risk psychosis; early intervention; youth depression; attenuated positive symptoms

## EPV0470

### Indicators of psychomotor development of premature infants by perinatal CNS lesion

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**Introduction:** The birth premature babies with hypoxic-ischemic damage to the neutral system with the subsequent development of hypoxic encephalopathy (HIE). Monitoring of the mental development and neurological status of such prematurely born children is carried out taking into account the corrected age and traditional scales.

**Objectives:** To compare indicators of psychomotor development in preterm infants (gestational age < 32 weeks) with and without hypoxic-ischemic encephalopathy.

**Methods:** A prospective study was carried out in the neurological department. The study included data from infants with a gestational age of < 32 weeks of gestation. Scale score immediately after birth and at corrected ages in the first, third and sixth months of life (data analysis according to Griffiths Scales).

**Results:** Data from 95 newborns were eligible for conclusion. Of these, 67 children took part in the study, 32,8% of them were diagnosed with hypoxic-ischemic encephalopathy. In newborns with HIE gestational age at birth was less so they received parenteral nutrition for a longer time, the body weight gained during the hospital stay was less, they needed more time to switch to enteral nutrition. And only at the 3<sup>rd</sup> (80% of children) and 6<sup>th</sup> months of life, there were no statistically significant differences in psychomotor development between groups with and without hypoxic-ischemic encephalopathy.

**Conclusions:** In this study, it was shown that in premature infants with hypoxic-ischemic encephalopathy, normal indicators of psychomotor development and neurological status were restored at the corrected age only by 6 months of age.

**Disclosure:** No significant relationships.

**Keywords:** premature infants; hypoxic-ischemic damage; psychomotor development

## EPV0471

### An unbalanced time-perspective profile in cardiac surgery patients as a risk factor for depression

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**Introduction:** Depression is one of common comorbid states that accompany cardiovascular diseases. Risk of co-morbidity can rise when patients have to undergo heart surgery, which is an additional stress-factor.

**Objectives:** To specify psychological correlations between depressive manifestations in cardiac surgery patients based on the analysis of their time perspective profile.

**Methods:** Using the Zimbardo Time Perspective Inventory, we examined 60 cardiac surgery inpatients (80% male, mean age 58.25±10.55). We calculated the statistical estimation of the received data based on the comparison with the norm and the correlation analysis.

**Results:** The research revealed that cardiac surgery patients' indices significantly exceeded the norm on three out of five scales – Negative-Past ( $t=4.405$ ;  $p=.000$ ), Positive-Past ( $t=3.536$ ;  $p=.000$ ), and Future ( $t=5.008$ ;  $p=.000$ ). We also identified essential correlations between the level of depression and the indices of Negative-Past ( $r=.390$ ;  $p=.002$ ) and Positive-Past ( $r=-.270$ ;  $p=.037$ ). We distinguished a positive correlation of the negative attitude to the past with cognitive-affective ( $r=.369$ ;  $p=.004$ ) and somatic ( $r=.338$ ;  $p=.008$ ) manifestations of depression, and a negative correlation with the level of education ( $r=-.292$ ;  $p=.024$ ).

**Conclusions:** The personal time perspective profile in cardiac surgery patients is unbalanced due to a high level of their negative attitude to the past with an optimal level in other time perspectives. The degree of the Negative-Past attitude correlates in the patients with a low level of education and a high risk of depression in all its manifestations. The given correlations should be taken into account when conducting preventive psychological interventions.

**Disclosure:** No significant relationships.

**Keywords:** risk factor; time perspective; Depression; cardiac surgery patients

## EPV0472

### Relationship between emotional coping and depressive symptomatology

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**Introduction:** From the life cycle perspective, the aging is described as the strengthening of adaptive resources and the capacity for recovery or compensation for losses. These skills are grounded in the coping strategies that individuals apply in order to effectively adapt to diverse situations. Emotion-focused, passive coping strategies are considered to be maladaptive in the long term. These strategies are associated with affective disorders, being these phenomena of great impact in older adults.

**Objectives:** Verify if there is a relationship between emotion-focused coping strategies and depressive symptoms

**Methods:** The sample was composed of 418 healthy older adults, aged between 60 and 89 years with an average age of 69.67 years and  $SD = 7.24$ , 63.6% of the participants are women and the remaining 36.4% are men. The Coping Stress Questionnaire was used to evaluate strategies focused on emotion (Sandin & Chorot, 2003). The Center for Epidemiological Studies-Depression Scale (Radloff & Teri, 1986) was used to evaluate depressive symptoms.

**Results:** Depressive symptomatology showed significant associations with all emotion-focused strategies: negative self-focus (.339), open emotional expression (.279), avoidance (.202) and religion (113) with a significance level of 0.05.

**Conclusions:** Emotion-focused coping strategies are associated with depressive symptomatology. Thus, it is considered that the use of these types of strategies in times of change or challenge will not benefit adaptation in the older adult. It is necessary to develop more active coping strategies for prevention in mental health during aging.

**Disclosure:** No significant relationships.

**Keywords:** depressive symptomatology; adaptation; coping; Coping Strategies

## Promotion of mental health

### EPV0473

#### Social media and its effect on mental health: Friend or foe?

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**Introduction:** Recently, several studies have shown both positive and negative impacts of social media on mental health. However, little is known regarding the reasons for the negative impact of social media on mental health.

**Objectives:** To evaluate the role of social media on mental health.

**Methods:** We reviewed the documentary 'The Social Dilemma' released on Netflix in September 2020, which explored the role of social media in our life. The documentary discussed the behind the scene development of the social media world.

**Results:** The central message from the documentary is that all the social media applications we use are capable of hijacking the thought process of your brain and are consciously designed by the artificial intelligence technology in a way that one spends more time on them. It collects users' data such as topics they like, follow, search, subscribe, shop, and several others. Based on this data it feeds you the information according to your taste and next time you log in on the website, you spend more time on it. This causes positive reinforcement, the more time you spend on a particular topic, the more you will be presented which results in addictive behavior.

**Conclusions:** It is known that social media addiction is prevalent, and it affects brain like drug and alcohol addiction. This documentary provided technological insight into this type of behavior. Though social media has its pros, it has numerous cons despite being used for right intentions. Better regulatory measures are needed to prevent psychological disorders related to social media usage.

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**Keywords:** Addiction; social media; Mental Health Policy; mental health

### EPV0474

#### UEPG Abraça Program: The importance of a psychosocial care service in the university context

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