hospitalized in an acute state of the depressive phase, and they did not receive therapy for more than 6 months. Blood was collected before the start of therapy. Serum was purified from major proteins by affinity chromatographyandseparatedby1D-electrophoresis. After trypsinolysis, the proteins were identified by HPLC/mass spectrometry. The ELISA kit was used to determine the amount of zNMDAR1.
Results: We identified a protein that does not occur in healthy people: a subunit of the glutamate NMDA receptor zeta-1 (zNMDAR1). As a result, we found a statistically significant ($p = 0.037$) almost fivefold increase in the concentration of this protein in the serum of patients with bipolar disorder (0.64 [0.18; 0.78] ng/ml) compared with healthy individuals.
Conclusions: Thus, in bipolar disorder NMDAR is damaged, which can lead appearance of their subunits in the serum, and which indicated a violation of glutamatergic neurotransmission. Then this protein claims the role of markers of bipolar disorder. *Mass spectrometric analysis was carried out of the "Human Proteome" Core Facility of the Institute of Biomedical Chemistry Moscow. RSW project, state registration number AAAA-A19-119020690013-2.*

Disclosure: No significant relationships.
Keywords: bipolar disorder; proteomics; biomarker

EPP0090

The Relationships Between Strategies Of Stress Coping And Temperament-Character Traits In Subjects With Bipolar Disorder

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Introduction: Bipolar disorder (BD) is a severe mood disorder, which is characterized by a cycling between the mania and major depression. The relationship between coping strategies and temperament-character traits in BD is unclear at this time.
Objectives: The aim of our study was to assess the relationship between strategies of coping stress and temperament-character traits in individuals with BD.
Methods: 168 patients diagnosed with BD in full remission were included. All participants were diagnosed by an experienced consultant psychiatrist based on DSM-5 and were assessed with Young Mania Rating Scale (YMRS) for confirmation to remission. Sociodemographic datas of all participants was obtained and Temperament Evaluation of Memphis, Pisa, Paris and San Diego–Autoquestionnaire (TEMPS-A) and Coping with Stress Scale (CSS) were applied.
Results: 75 patients (44.6%) were female and the mean age of the sample was 32.64±10.74 years, the mean duration of illness was 8.23±5.52 years and was found that the mean score of YMRS 5.35±4.19. It was presented Table 1 whether there was a statistically significant correlation between TEMPS-A and CSS subscales.
Conclusions: As coping strategies may be related to temperament-character traits and that could be important for psychological interventions in patients with BD.

	Depressive	Hypertimic	Cyclothymic	Irritable	Anxious
Avoidance	-,067	-,159	,098	-,150	-,083
	,485	,095	,305	,115	,387
Problem-focused coping strategies	**-,268**	-,153	**,366**	**-,246**	-,134
	,004	,109	**,000**	**-,009**	,161
Social support	**-,191**	**-,495**	-,060	**-,646**	**-,416**
	,044	**,000**	,535	**,000**	**,000**
Total	**-,256**	**-,399**	,149	**-,370**	**-,324**
	,007	**,000**	,118	**,000**	**,001**

Disclosure: No significant relationships.
Keywords: bipolar disorders; strategies of stress coping; temperament-character traits

EPP0091

Cariprazine's efficacy in treating affective symptoms – pooled data from schizophrenia and bipolar depression trials

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Introduction: Affective symptoms are a common feature of schizophrenia and define bipolar disorder. Alterations in dopamine neurotransmission and activity at D_3-D_2 receptors is associated with depressive symptoms providing the rationale for targeting D_3-D_2 receptors with partial agonists.
Objectives: The aim of the analysis herein is to examine and compare the efficacy of cariprazine in treating affective symptoms in both schizophrenia and bipolar depression.
Methods: Data from 3 schizophrenia [NCT00694707, NCT01104766, NCT01104779] and 3 bipolar I depression studies [NCT013896447, NCT02670538, NCT0267055] were pooled for the analyses. To investigate efficacy across individual affective symptoms, the Marder anxiety/depression and negative symptom items of the Positive and Negative Syndrome Scale (PANSS) and single items of the Montgomery-Asberg Depression Rating Scale (MADRS) were analysed. Improvement across affective symptoms was examined primarily evaluating least square mean differences (LSMDs) in comparison to placebo in mean change from baseline.
Results: The pooled ITT population was comprised of persons with schizophrenia (placebo=442, cariprazine=1024) and bipolar disorder (placebo=460, cariprazine=923). Cariprazine resulted in a significantly greater reduction when compared to placebo in three out of the four Marder anxiety/depression items; anxiety ($p<0.01$), tension ($p<0.001$) and depression ($p<0.05$). Similarly, cariprazine was significantly better than placebo in 9 out of the 10 MADRS individual items; apparent sadness ($p<0.001$), reported sadness ($p<0.001$), reduced sleep ($p<0.05$), reduced appetite ($p<0.001$), concentration difficulties