EPV0128

The Effect of Social Support on Recovery and Treatment Adherence in Individuals Diagnosed with Bipolar Disorder

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Introduction: Social support have affected the recovery and adherence with treatment in bipolar patients.
Objectives: This research aims to understand the contribution of social support mechanisms to treatment adaptation processes in individuals struggling with bipolar disorder and the effects of these support mechanisms on recovery. In this way, the importance of the social support factor will be tried to be understood in order to provide more effective and customized support to individuals living with bipolar disorder.
Methods: This study will planned to descriptive correlational design. The data will collect to using the Morisky Treatment Adherence Scale (MTAS), the Multidimensional Scale of Perceived Social Support (MSPSS), the Recovery Process Inventory (RPIS), and the Sociodemographic Data Form from individuals diagnosed with Bipolar disorders. By filling out these scales, participants will evaluate their treatment compliance, perceived social support levels, and recovery processes. The data will be subjected to appropriate methods for statistical analysis and will be used to understand the relationships between social support and treatment compliance and recovery processes.
Results: Data extraction is still on going in detailed style by principal authors. Description of studies and the key findings will be presented.
Conclusions: It is thought that the results obtained from this research will be an important guide in providing more effective support to individuals with the level of social support, treatment adherence and recovery processes in individuals struggling with bipolar disorder
Key Words: bipolar disorder, social support, treatment adherence, recovery.

Disclosure of Interest: None Declared

EPP0366

Neural Abnormalities in Bipolar Disorder: A Meta-Analysis of Functional Neuroimaging Studies

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Introduction: Bipolar I disorder (BD-I) is a chronic and recurrent mood disorder characterized by alternating episodes of depression and mania; it is also associated with substantial morbidity and mortality and with clinically significant functional impairments. While previous studies have used functional magnetic resonance imaging (fMRI) to examine neural abnormalities associated with BD-I, they have yielded mixed findings, perhaps due to differences in sampling and experimental design, including highly variable mood states at the time of scan.
Objectives: The purpose of this study is to advance our understanding of the neural basis of BD-I and mania, as measured by fMRI activation studies, and to inform the development of more effective brain-based diagnostic systems and clinical treatments.
Methods: We conducted a large-scale meta-analysis of whole-brain fMRI activation studies that compared participants with BD-I, assessed during a manic episode, to age-matched healthy controls. Following PRISMA guidelines, we conducted a comprehensive PubMed literature search using two independent coding teams to evaluate primary studies according to pre-established inclusion criteria. We then used multilevel kernel density analysis (MKDA), a well-established, voxel-wise, whole-brain, meta-analytic approach, to quantitatively synthesize all qualifying primary fMRI activation studies of mania. We used ensemble thresholding ($p<0.05$-0.0001) to minimize cluster size detection bias, and 10,000 Monte Carlo simulations to correct for multiple comparisons.
Results: We found that participants with BD-I (N=2,042), during an active episode of mania and relative to age-matched healthy controls (N=1,764), exhibit a pattern of significantly ($p<0.05$-0.0001; FWE-corrected) different activation in multiple brain regions of the cerebral cortex and basal ganglia across a variety of experimental tasks.
Conclusions: This study supports the formulation of a robust neural basis for BD-I during manic episodes and advances our understanding of the pattern of abnormal activation in this disorder. These results may inform the development of novel brain-based clinical tools for bipolar disorder such as diagnostic biomarkers, non-invasive brain stimulation, and treatment-matching protocols. Future studies should compare the neural signatures of BD-I to other related disorders to facilitate the development of protocols for differential diagnosis and improve treatment outcomes in patients with BD-I.

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Child and Adolescent Psychiatry

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Expectations of children and adolescents suffering from cancer

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