### **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 wholebrain 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, metaanalytic 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 brainbased 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.

Disclosure of Interest: None Declared

## Child and Adolescent Psychiatry

### **EPV0129**

# Expectations of children and adolescents suffering from cancer

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**Introduction:** Investigation expectations for children and adolescents with cancer is an important issue for their psycho-emotional development as well as their quality of life.

**Objectives:** To investigate the expectations of children suffering from cancer.

**Methods:** 102 questionnaires were collected from pediatric patients suffering from neoplasia disease (62 boys and 40 girls) with a median age of 13 years, covering the multidimensional expectation questionnaire (MEQ) suitable for children with cancer in a 4-point Likert scale. The MEQ was then evaluated using the SPSS.21 statistical package, which resulted in 13 questions. The questionnaire of expectations highlighted three factors that referred to the "family life expectations", "daily life / daily routine and career prospects", and "expectations of networking friendship", respectively. The statistical results were obtained by multi-line regression analysis, with the Stata 12.1 statistical package, while ethical issues were complied with and licensed.

**Results:** MEQ reliability (Cronbach's alpha) for the entire scale was 0.82 and for agents ranged from 0.65-0.84. Overall, pediatric cancer patients delivered a fairly high average score of  $3,33 \pm 0,42$  questions in the expectation's questionnaire, while the mean scores were  $3,29 \pm 0,63$ ,  $3,51 \pm 0$ , 45 and  $3.19 \pm 0.54$ , respectively. From the results of the analysis of multiple regression, it appeared that, as the age increases, the patients with neoplastic disease have overall 76 lower expectations (p = 0.014), while the satisfaction of the doctors-nursing staff in the total expectations is positive (p = 0.018). In the family life expectancy factor, the age of children appears to play a negative role in increasing age (p = 0.019), while positive body image and satisfaction with doctors-nursing staff (p = 0.040, p = 0.006) respectively. It appeared that children aged> 13 years have worse outcomes in expectations of the daily routine and career prospects with (p = 0.037).

**Conclusions:** The MEQ has proven to be a valid and reliable tool that can provide pediatric staff and researchers with information about the expectations of children and adolescents with cancer that require long-term health care.

Disclosure of Interest: None Declared

### **EPV0130**

# Pattern of video game usage and video game disorder in Portugueses adolescents: A study about parental and peer attachment, parenting styles, and communication in parenting

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**Introduction:** Video game disorder has been a subject of increasing interest, being associated with patterns of insecure attachment and authoritarian and permissive parenting styles. However, there is still a gap concerning the relationship between video game disorder and parent-child communication, one of the fundamental components of attachment to parents. Particularly in the Portuguese context, research on these topics and

their interrelations is still scarce, thus remaining relatively unexplored.

**Objectives:** To explore the pattern of video game usage and video game disorder, as well as their relationships with parental and peer attachment, parenting styles, and communication in parenting within a sample of Portuguese adolescents.

**Methods:** 150 Portuguese teenagers, recruited at public Portuguese schools, aged between 10 and 19 years old (mean age = 14.37, DP = 3.12; 52.7% girls (n = 79), and mostly living with both parents (79.7%, n = 106) fulfilled a sociodemographic and an academic questionnaire, a questionnaire on video game use patterns, the Video Game Disorder Scale - Short Version 9, the People in My Life Questionnaire, the Portuguese hetero-report version of the Parenting Styles and Dimensions Questionnaire: Short Versionand the Perception Scale of Parenting Communication.

**Results:** The majority of the sample indicated 3rd childhood (n = 81, 54.0%), specifically at 8 years old, as the age of video game initiation and a playtime of less than or equal to 2 hours (n = 111, 74.0%), with only 2 participants found to have a video game disturbance index (1.3%). A positive association was found between video game disturbance and the average hours of gameplay, as well as a negative association with the age of game initiation. Additionally, relationships were explored, revealing that video game disturbance is negatively related to lower quality of attachment to parents and peers, positively related to an authoritative parenting style, and negatively related to less available, open, and affectionate parent-child communication.

**Conclusions:** This study provides an in-depth understanding of adolescents' behavior regarding video games, contributing to the knowledge of the topic in the Portuguese context. Furthermore, the identification of factors associated with video game disturbance allows for the development of remediation and prevention programs for this addictive disturbance, which are essential tools in psychological practice.

Disclosure of Interest: None Declared

#### **EPV0133**

## Attachment representations in high intellectual potential (HIP) children compared to non-HIP children during development

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**Introduction:** The studies about developmental bases of attachment in healthy children with high intellectual potential (HIP) are rare.Moreover, the literature underline socio-emotional disorders in HIP and difficulties with behavioral adjustment of parents.

**Objectives:** We aimed to explore the developmental trajectory of attachment in HIP children without psychological or learning disorders.