

Transcendence Scale (24 items). Besides, clinical data of the patients were involved in the study including blood cell counts, rheumatoid factor, immunoglobulin G, Sjögren-specific autoantibodies and disease activity scores (semi-objective and patient reported.). The statistical analysis was conducted applying group comparisons between spiritual and non-spiritual groups, and linear and logistic regression analyses adjusted for sex, age, disease duration, settlement type, education, living in partnership and smoking. Out of the 112 patients 4 gave incomplete response, and therefore got excluded from the analysis, resulting in a total sample size of 108.

Results: Semi-objective disease activity score (ESSDAI) and perceived vaginal dryness was significantly lower in the non-spiritual group. Spirituality was proven as a significant predictor of anti-SSB autoantibody serum activity and ESSDAI, while engaging in prayer/meditation and its duration predicted significantly anti-SSA autoantibody serum activity, perceived skin and tracheal dryness. Concerning logistic regression analysis, we found that an increase of one unit in spirituality reduces the probability with 81.6% of having a detectable, semi-objective disease activity at all. Significant associations were found between the duration of prayer/meditation and both semi-objective and patient reported disease activity scores and autoantibody anti-SSB with an inverse ratio based on logistic regression model.

Conclusions: Spirituality is associated with immune parameters and disease activity in pSS. Patients with spiritual attitude are less likely to have increased disease activity. Besides being spiritual, engagement in individual spiritual activities, such as prayer/meditation has beneficial disease modifying effect. These changes are supposedly due to psychoneuroimmunological pathways. In addition to the biologically measurable variables, the alleviation and aggravation of perceived symptoms (e.g. dryness) are important outcomes of spiritual engagement and practice.

Disclosure of Interest: None Declared

EPV0799

Case-series of patients treated with anti-NMDAR encephalitis at Semmelweis University

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Introduction: Anti-NMDAR encephalitis is an autoimmune disorder, characterized by neuropsychiatric symptoms, such as mood instability, psychosis, catatonia, dyskinesia, seizures and vegetative lability. Psychiatric symptoms usually occur in the initial phase, therefore almost half of the patients are first observed at a psychiatric unit, however in later phases the patients' condition often show progression with the characteristic neurological symptoms, such as perioral dyskinesia and seizures. Although, early recognition and treatment is essential to reach good outcomes, delay in the diagnostic process often happens due to the unspecific early symptoms and the lack of knowledge of this disorder amongst psychiatrists.

Moreover, there are cases, where neurological symptoms do not appear, which can lead to diagnostic failure and mismanagement of these patients. Since anti-NMDAR encephalitis is a rare

condition, it is important to treat such cases in specific centres, where sufficient knowledge and multidisciplinary approaches are available.

Objectives: Our aim was to gather all patients' data treated with anti-NMDAR encephalitis at two departments (Neurology and Psychiatry) of Semmelweis University. We wanted to analyse psychiatric manifestations of the disorder in details and follow these symptoms long term, with special interest on the cognitive symptoms.

One of our aims was to follow-up these patients and measure antibody titres in their serum, to be able to assess, whether there was any association between prolonged serum positivity and cognitive impairment.

Methods: We have retrospectively analysed data of previous cases and prospectively followed up recently hospitalised patients.

Neurocognitive assessment had been conducted by the same psychologist, all the patients were followed up by the same interdisciplinary team, including a neurologist and two psychiatrists. Laboratory tests (autoimmune antibody essays) were conducted by the Immunological Laboratory at Semmelweis University.

Results: Altogether, 13 female patients were treated with anti-NMDAR encephalitis in the past ten years at Semmelweis University. All of them received plasma exchange, iv. steroids and azathioprine. 8 out of the 13 needed ventilation and intensive care treatment. 2 of these patients have mild psychiatric symptoms as residual symptoms, and 1 of them is still in the recovery stage, currently experiencing mild cognitive symptoms.

Only two patient had ovarian teratomas out of the 13, which is a lower number than expected from previous studies.

4 out of 12 had positive antibody titre at follow up, one patient is still at recovery stage, however her antibody titres are still very high.

Conclusions: Semmelweis University is one of the largest centre treating patients with anti-NMDAR encephalitis in Hungary. We had altogether 13 patients in the last ten years, with very good outcome, since all of them recovered, although 2 have residual symptoms.

Disclosure of Interest: None Declared

EPV0800

Interleukin-15: a possible link between anorexia nervosa and schizophrenia

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Introduction: Interleukin-15 is a cytokine that induces or enhances differentiation, maintenance, or activation of several T-cell subsets (including NK, NKT, Th17, Treg, and CD8+ memory cells) and also plays an important role in regulating visceral (intra-abdominal or interstitial) fat breakdown and myofibrillar protein synthesis (hypertrophy). It is also involved in modulating serotonergic activity in the brain by modulating the transmission of GABA and serotonin, which may be the basis for mood and memory disorders, as well as activity levels, sleep, and thermoregulation. Both anorexia nervosa (AN) and schizophrenia (SCH) represent two distinct and serious psychiatric disorders in which

some of these symptoms may overlap and where neuroinflammation plays an important role which is yet to be precisely determined.

Objectives: This article summarizes recent findings and highlights interleukin-15 as a possible link between anorexia nervosa and schizophrenia.

Methods: A review of the current literature in the field of psychoneuroimmunology.

Results: In recent years, research has shown elevated levels of IL -15 in the serum of patients suffering from anorexia nervosa and schizophrenia. It is also interesting to note that IL -15 has structural similarities to IL -2, which previous studies have also shown to be elevated in patients with schizophrenia.

Conclusions: These associations, so far suggesting an important role of inflammation and its mediators, need further investigation in light of possible genetic overlap between anorexia nervosa and schizophrenia identified in genome-wide association studies (GWAS).

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EPV0801

Clinical and immunological features of prolonged and chronic endogenous manic and manic-delusional states in the structure of endogenous diseases

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Introduction: The relevance of studying the clinical and immunological characteristics of prolonged and chronic endogenous manic and manic-delusional states is conditioned by their high prevalence, insufficient understanding of pathogenetic mechanisms, and the need to develop adequate therapeutic approaches.

Objectives: To study the clinical and biological correlations between inflammatory markers of blood plasma, the severity of manic symptoms and psychopathological characteristics of patients with prolonged and chronic endogenous manic and manic-delusional states.

Methods: 70 female patients aged 18 to 55 years (mean age 33.6 ±5.9 years) with prolonged and chronic endogenous manic and manic-delusional states within different nosologies (F31.1-2, F25.01, F25) were examined. Psychometric assessment was performed using the PANSS, YMRS, and GAF scales. The control group consisted of 55 mentally and somatically healthy women of the corresponding age.

Leukocyte elastase (LE) activity, α 1-proteinase inhibitor (α 1-PI) activity, and the autoantibody levels to astrocytic protein S-100B and myelin basic protein (MBP) were determined in blood plasma.

Results: The increase in the level of immune system activation of different degrees (according to the complex of inflammatory and autoimmune markers) associated with the severity of the patient's condition within the examined nosologies was revealed.

The highest level of immune activation, characterized by an increase in the activity of both LE and α 1-PI ($p < 0.01$), and the level of autoantibodies to S-100B and MBP ($p < 0.05$), was characteristic of patients with chronic endogenous manic and manic-delusional states in the framework of schizophrenia. Manic symptoms within different

nosologies had clinical features, however, no differences in the severity of these symptoms on the YMRS scale were revealed ($p > 0.05$).

Positive correlations were found between LE activity and the PANSS subscale of general psychopathological symptoms ($R = 0.3$, $p = 0.006$) and the PANSS total score ($R = 0.3$, $p = 0.03$). The level of antibodies to S-100B correlated with the PANSS negative subscale score ($R = 0.3$, $p = 0.04$). A negative correlation was found between LE activity and the level of social functioning of patients according to the GAF scale ($R = -0.3$, $p = 0.02$).

Conclusions: The immune profile of patients with prolonged and chronic manic and manic delusional states within endogenous psychiatric disorders is determined mainly by nosologic affiliation, which is also related to the clinical features of manic states.

Disclosure of Interest: None Declared

EPV0802

You are what you eat: diet, microbiota and mental health

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Introduction: In recent years, there is a growing interest in microbiota and how certain dietary patterns affect our brain.

We know that diet has an important impact in physical and mental health. The mechanism that underlies is already unknown, but there is emerging evidence that diet modulates brain gut microbiota and has implications in mental problems.

Objectives: The aim of this poster is highlight the importance of diet in mental health and the link with microbiota.

Methods: Review of recent literature about diet, microbiota and psychiatry. The studies were collected of the electronic databases PubMed.

Results: New researches highlight the importance of adequate nutrition for mental health. Several studies link healthy diet with a minor risk of mental illnesses or with the improvement of depressive symptoms. Likewise, poor dietary habits could aggravate cognitive decline and increased risk of developing anxiety, depression or other mental illnesses.

It has been shown that a diet rich in fiber, polyphenols and micronutrients improve gut microbial composition and can reduce metabolic endotoxemia and neuroinflammation, and this has been associated with improvements in brain health. Also, prebiotic and probiotics have positive effects.

Therefore, dietary interventions could be a complementary therapeutic approach for patients with mental problems. This is what nutritional psychiatry focuses on.

Conclusions: Microbiota as a potential therapeutic target for mental illness is a hot topic in psychiatry, but also, its interaction with dietary change or the use of probiotics and prebiotics. This action is easy to implement in our clinical practice and could be part of a biopsychosocial treatment to improve or prevent some psychiatric disorders. Nutritional psychiatry is a new field that needs to be developed and the knowledge in microbiota, diet and mental health could help. Hopefully, the research about this topic continues expanding.

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