regarding the possible consequences of their abuse/misuse emerges amongst users.
Conclusions: Despite the limited evidence that some substances may improve cognitive functions in healthy subjects and neglecting their detrimental side effects and potential risk of misuse, abuse and addiction, there is an increasing worldwide use of the so-called neuroenhancers, especially in some categories of individuals, such as university students. Further studies are needed to collect reliable data on the effects of neuroenhancers in healthy subjects. Neuroenhancement puts into question the concept of authenticity, so that the problem requires to be analyzed within a complex ethical conceptual frame.

Disclosure: No significant relationships.
Keywords: Ethics; neuroenhancement; emotional enhancement; psychopharmacology

EPP0748

Endocrine biomarkers related to sleep-wake cycle and sleep disturbances in patients with bipolar disorder: A systematic review

L. Gonzalez-Blanco[1,2,3,4,5], C. Moya Lacasa[6,7]*, S. Jiménez-Fernández[8], M. Valtueña[1], C. Martinez-Cao[7], A. García Fernández[1], P.A. Saiz[1], M.P. Garcia-Portilla[1], J. Bobes[1] and L. Gutierrez Rojas[9]

[1]University of Oviedo, Department Of Psychiatry, oviedo, Spain; [2]Servicio de Salud del Principado de Asturias, Psychiatry, Oviedo, Spain; [3]Instituto de Investigación Sanitaria del Principado de Asturias, Psychiatry, Oviedo, Spain; [4]Instituto de Neurociencias del Principado de Asturias, Psychiatry, Oviedo, Spain; [5]Centro de Investigación Biomédica en Red de Salud Mental (CIBERSAM), Psychiatry, Oviedo, Spain; [6]Servicio de Salud del Principado de Asturias, Psiquiatría, Oviedo, Spain; [7]University of Oviedo, Department Of Psychiatry, Oviedo, Spain; [8]Complejo Hospitalario de Jaén, Unidad De Salud Mental Infanto Juvenil, Jaén, Spain and [9]Hospital Clínico San Cecilio, Psychiatry, Granada, Spain
*Corresponding author.
doi: 10.1192/j.eurpsy.2022.914

Introduction: Sleep and circadian disturbances have been widely studied in patients with bipolar disorder (BD) (Duarte Faria et al., 2015; Gonzalez, 2014). However, there is no clear evidence about the role of peripheral biomarkers of circadian cycle in this population.
Objectives: This systematic review aims to identify potential endocrine biomarkers of circadian rhythm in blood and study their relationship with sleep problems in BD.
Methods: An electronic search of Pubmed and PsycoInfo databases were performed. It includes articles about the topic from 1991 to 2021. The search strategy was: ("Peripheral biomarkers" OR "biological markers" OR biomarker OR cortisol OR melatonin OR orexin OR hypocretin) AND (blood OR serum OR plasma) AND ("sleep-wake" OR "circadian rhythm" OR sleep OR insomnia) AND "bipolar".
Results: 92 records were obtained after excluding duplicates. Only five studies met the inclusion criteria (n = 499; BD = 125; unipolar depression = 148; schizophrenia = 80; controls = 146). The endocrine parameters analyzed were: cortisol (3 studies), melatonin (1 study) and orexin-A (1 study). Overall, no significant associations between these biomarkers and sleep disturbances, assessed with subjective (psychometric evaluation) and/or objective (polysomnography) measures, were detected.
Conclusions: This systematic review highlights the lack of studies that explores the role of endocrine biomarkers related to circadian function in the pathophysiology of sleep disturbances in BD.

Disclosure: No significant relationships.
Keywords: circadian rhythms; sleep disorders; orexin; melatonin

EPP0749

Medically unexplained somatic symptoms and its association with functionality and childhood trauma in type-1 bipolar disorder

N.G. Usta Saglam*, B. Ayık, A. Baş and F. Izci

Istanbul Erenkoy Training and Research Hospital for Psychiatry and Neurological Diseases, Psychiatry, Istanbul, Turkey
*Corresponding author.
doi: 10.1192/j.eurpsy.2022.915

Introduction: Somatic symptoms with the heterogeneous character that are not fully explained by a medical condition are common in bipolar disorder (BD) which might interfere with the choice of treatment, health care utilization, medical costs as well as functionality.
Objectives: The purpose of this study was to evaluate somatic symptoms in remitted type 1 BD and to examine the association of somatization, functionality, and childhood trauma which is a known mediator of adult somatization.
Methods: After excluding patients with medical comorbidities, 61 patients diagnosed with BD type-1 according to the Diagnostic and Statistical Manual of Mental Disorders-V (DSM-V) participated in the study. We required at least 8 weeks of remission and confirm it with Hamilton Depression Rating Scale (HDRS) and Young Mania Rating Scale (YMRS). Somatization Scale, Functioning Assessment Short Test (FAST) and Childhood Trauma Questionnaire (CTQ) were administered to the participants.
Results: Somatization scores were significantly correlated with CTQ (r=.310, p=.016), FAST- total (r=.307, p=.016), FAST-financial issues (r=.357, p=.005) and FAST-interpersonal relationships (r=.320, p=.012) subscale scores while inversely correlated with years in education (r=-,305, p=.017). When a partial correlation was run to determine the relationship between somatization and functioning whilst controlling for childhood trauma, there was no statistically significant correlation between somatization and functioning (p=.076).
Conclusions: Our study suggests childhood trauma may have a major influence on the relation between somatization and functionality in patients with type- 1 BD. When addressing physical symptoms in patients with type-1 BD, an integrated approach including childhood trauma should be considered.

Disclosure: No significant relationships.
Keywords: somatic symptoms; Childhood Trauma; bipolar disorder; functionality