

duration, limited scientific evidence establishes the duration of psychiatric hospitalization in patients with BD. The objective of this study is to assess the clinical characteristics and factors influencing the duration of hospital stay in patients with BD.

This is a retrospective observational and descriptive study. The protocol was approved by the ethics and research committee of the Hospital Universitario "Dr. José Eleuterio Gonzalez" in Monterrey, Nuevo León, México under the name "Factores predictores del tiempo de hospitalización psiquiátrica en pacientes con trastorno bipolar". Retrospective investigation was carried out of patients admitted between July 2015 and May 2022. Clinical and socio-demographic characteristics of 276 patients diagnosed with BD type 1 and type 2 were collected. Descriptive analyses were conducted for all variables using frequencies and percentages for categorical variables. Typical dispersion measures were applied to quantitative variables. Mann-Whitney U test was used to compare means between groups for dichotomous variables, and the Kruskal-Wallis test for variables with more than two categories. Spearman's correlation coefficient was used for quantitative variables. Statistically significant values were considered at  $p < 0.05$ .

Factors associated with longer hospital stay included younger age ( $p < 0.001$ ), being separated or divorced ( $p = 0.002$ ), unemployment ( $x=27.94$  vs.  $x=23.77$ ;  $p=0.12$ ), absence of medical comorbidity ( $x=27.21$  vs.  $x=20.73$ ;  $p=0.11$ ), previous hospitalization history ( $x=28.50$  vs.  $x=23.26$ ;  $p=0.005$ ), history of substance abuse ( $x=28.55$  vs.  $24.68$ ;  $p=0.26$ ), use of pharmacological restraint ( $p=0.28$ ), and non-use of mood stabilizers during hospitalization ( $x=27.54$  vs.  $x=24.11$ ;  $p=0.27$ ).

Overall, this study highlights the significance of comprehensive and personalized treatment approaches for patients with bipolar disorder. By addressing specific risk factors and optimizing therapeutic strategies, healthcare professionals can potentially reduce the length of hospital stays, leading to improved patient well-being and resource utilization within psychiatric care facilities. However, further research and intervention studies are warranted to validate and implement these findings in clinical practice.

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## Sex Differences in Attention Improvements Across Two Clinical Trials of AKL-T01, A Novel Digital Therapeutic for Inattentive Symptoms in Children and Adolescents with ADHD

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**Objectives.** Attention-deficit/hyperactivity disorder (ADHD) remains underdiagnosed and undertreated in girls. One important contributor is the predominance of inattentive symptoms in girls

relative to boys. Though less "visible," inattentive symptoms represent a key driver of impairment, often persisting into adulthood. EndeavorRx (AKL-T01) is a game-based, FDA-authorized digital therapeutic directly targeting inattention. This analysis sought to examine potential sex differences in the efficacy of AKL-T01.

**Methods.** We conducted a secondary analysis of clinical outcomes by sex in 326 children and adolescents from two trials of AKL-T01 ( $n1 = 180$  children; 30.6% female,  $M$  age = 9.71;  $n2 = 146$  adolescents; 41.1% female,  $M$  age = 14.34). All participants had high inattention per a baseline score  $\leq -1.8$  on the Test of Variables of Attention (TOVA), a computerized, FDA-cleared continuous performance task objectively measuring attention. Participants used AKL-T01 for 25 minutes/day over 4 weeks. Primary outcomes included change in attention on the TOVA Attention Comparison Score (ACS) and sub-metrics, and change in symptoms on clinician-rated ADHD Rating Scale (ADHD-RS). To evaluate study hypotheses, we conducted a series of t-tests of TOVA and ADHD-RS change scores by sex.

**Results.** Across the pooled sample, girls using AKL-T01 demonstrated significantly greater improvements in attention on the TOVA ACS ( $M\Delta = 2.44$ ) compared to boys ( $M\Delta = 1.32$ ;  $t[211.77] = 2.62$ ,  $d = .31$ ,  $p = .009$ ), as well as TOVA reaction time standard score (girls'  $M\Delta = 13.22$ ; boys'  $M\Delta = 3.54$ ;  $t[229.12] = 3.93$ ,  $d = .46$ ,  $p < .001$ ). We did not observe sex differences in the 2 other TOVA sub-metrics, nor in ADHD-RS ( $ps > .05$ ). There were sex differences in compliance ( $t[207.99] = 2.17$ ,  $d = .26$ ,  $p = .031$ ), with girls completing more sessions on average ( $M = 90.22$ ) compared to boys ( $M = 80.19$ ).

**Conclusions.** Results suggest that AKL-T01 may be associated with particularly strong improvements to attentional functioning in girls relative to boys. That there were no significant sex differences in ADHD symptom change over the course of treatment in either sex underscores the specificity of these effects to inattention processes rather than broad ADHD symptoms. Limitations include categorization based on binary sex, which may not capture nuances of gender identity.

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## A Single-Arm Pivotal Trial to Assess the Efficacy of AKL-T01, a Novel Digital Intervention for Attention, in Adults Diagnosed with Attention Deficit Hyperactivity Disorder

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**Objectives.** Rates of attention deficit hyperactivity disorder (ADHD) have increased among adults, and barriers to treatment (e.g., medication shortages; inaccessibility of behavioral treatments) underscore need for novel, scalable interventions. There is a