Introduction Mania is challenging to treat. Typical antipsychotics may be more efficient compared with atypical antipsychotics, however, with unfavourable side effects.
Objectives To help the clinician choose between typical and atypical antipsychotics.
Aims To investigate the correlation between change in severity of mania and the corresponding day to day use of typical and atypical antipsychotics.
Methods This retrospective case record study included patients admitted with mania (International Classification of Diseases 10th revision code F30, F31.0, F31.1, F31.2 or F31.6) at the Department of Affective Disorders, Aarhus University Hospital, Denmark, between January 2013, and December 2015. The dose of typical and atypical antipsychotics was standardized as defined daily dose according to the World Health Organization's guidelines. The severity of mania was measured daily with the Modified Bech-Rafaelsen Mania Scale (MAS-M), a validated, nurse administered scale (MAS-M). We applied a linear regression in a mixed model approach to compare the Mas-M score over time under the influence of typical and atypical antipsychotics, respectively, adjusted for baseline characteristics.
Results We included 43 patients. Patients receiving typical antipsychotics had more recent hospital admissions, a higher dosage antipsychotics and more constraint. The baseline MAS-M score was higher in patients receiving typical antipsychotics. The daily change in MAS-M score was–0.25 for typical antipsychotics and–0.23 for atypical antipsychotics with a difference of 0.02 (95% CI 0.008–0.039).
Conclusions The rate of improvement of mania may be independent of baseline illness or type of antipsychotic medication. This may be confounded by indication.
Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.2169

EW0300

Neuropsychological differences between bipolar and borderline personality disorder patients

I. Michopoulos[1,*], K. Tournikioti[1], R. Gournellis[1], P. Ferentinos[1], K. Vassilopoulou[1], A. Karavia[1], M. Papadopoulou[2], A. Douzenis[1]
[1] *National and Kapodistrian University of Athens, Medical School, 2nd Department of Psychiatry, "Attikon" Hospital, Athens, Greece*
[2] *Ygeias Melathron" Hospital, Department of Neurology, Athens, Greece*
[*] *Corresponding author.*

Introduction There is a continuing debate about the differences and similarities between bipolar disorder (BD) and borderline personality disorder (BPD).
Objectives Only few studies have focused on the neuropsychological profile of these two disorders.
Aims We studied the differences on memory, executive function and inhibitory control between BD and BPD patients.
Methods Twenty-nine patients with BD in euthymia, 27 patients with BPD and 22 healthy controls matched for age and education were included in the study. All of them were female. BD patients who could also be diagnosed with BPD were excluded from the study. Participants were administered a series of tests from the Cambridge Neuropsychological Test Automated Battery (CANTAB), accessing memory, executive function and inhibitory control.
Results BD and BPD patients performed worse than controls in general. Significant differences were found in the PAL test; BD patients had 46.71, BPD patients had 36.56 and controls had 15.77 errors ($P = 0.004$). BPD patients performed worse in the IE/ED set-shifting test; they made 48.16 errors while BD patients made 23.64 and controls 16.14 ($P = 0.001$). BPD patients performed better in the problem-solving task (SOC), they solved 10.0, BD patients 6.32 and controls 8.32 problems ($P < 0.001$).
BD and BPD patients had similar performance in the SST inhibition task but worse than controls ($P = 0.03$).
Conclusions BD and BPD seem to have differences in neuropsychological performance. BD patients show more deficits in memory learning and problem solving while BPD patients show more deficits in set shifting.
Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.2170

EW0301

Could soluble intercellular adhesion molecule-1 be associated with state affective symptomatology in healthy adults?

M. Pantovic[1,*], B. Dunjic Kostic[1], N. Petronijevic[2], M. Velimirovic[2], T. Nikolic[2], V. Jurisic[3], M. Lackovic[1], S. Totic[1], A. Jovanovic[1], A. Damjanovic[1], M. Ivkovic[1]
[1] *Clinic for Psychiatry Clinical Centre of Serbia, Department for Affective Disorders, Belgrade, Serbia*
[2] *School of Medicine, Institute of Medical Biochemistry, Belgrade, Serbia*
[3] *School of Medicine, Department of Pathophysiology, Kragujevac, Serbia*
[*] *Corresponding author.*

Introduction Immune parameters are frequently associated with mood disorders and affective temperaments. In our study, we investigate the role of soluble intercellular adhesion molecule-1 (sICAM-1) in affective temperaments and mood symptoms in healthy adults.
Methods Healthy adults were screened for psychiatric disorders using the non-patient version of the Structured Clinical Interview for DSM-IV-I and II. Affective temperaments were evaluated with Temperament Evaluation of Memphis, Pisa, Paris and San Diego-Autoquestionnaire (TEMPS-A). State mood symptoms were assessed using the Young Mania Rating Scale (YMRS) and Montgomery-Åsberg Depression Rating Scale (MADRS). Serum sICAM-1 levels were measured using enzyme-linked immunosorbent assay.
Results We identified no association between sICAM-1 levels and affective temperament scores. We identified correlation between sICAM-1 levels and manic symptoms measured by YMRS. Furthermore, sICAM-1 was a significant predictor of manic symptoms in a linear regression model with age, gender, BMI and smoking habits as confounding variables.
Conclusions Our findings suggest that sICAM-1 could be a relevant immune factor for severity of state affective symptoms and could contribute to better understanding of complexity of affective disorders.
Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.2171

EW0302

The association between school achievement and subsequent development of bipolar disorder

S.D. Pedersen[1,*], L. Petersen[2], O. Mors[1], S.D. Østergaard[1]
[1] *Aarhus University Hospital, Department of Clinical Medicine-Psychosis Research Unit, Risskov, Denmark*
[2] *National Centre for Register-based Research, Department of Economics and Business Economics, Aarhus BSS, Aarhus, Denmark*
[*] *Corresponding author.*