Introduction: The early diagnosis of bipolar II disorder remains difficult in clinical practice, hence the importance of psychometric tests. 

Objectives: To detect hypomania in patients followed for a major depressive disorder (MDD) and to determine factors which are correlated with it.

Methods: This was a cross-sectional, descriptive and analytical study. It involved 40 psychiatric outpatients, who were followed for MDD (isolated or recurrent episode) at the Hedi Chaker University Hospital in Sfax (Tunisia), from January 26 to February 10, 2020. The study was conducted using a questionnaire and the Angst Hypomania Checklist-20 (HCL-20).

Results: The sex ratio (M/F) was 0.66 with an average age of 45.8 years. MDD started at an average age of 41.45 years. According to HCL-20, half of our sample had hypomania. The presence of hypomania was correlated with young age (p = 0.022), academic failure (p = 0.038) and smoking (p = 0.003). In addition, there was a statistically significant relationship between the presence of hypomania and the characteristics of the disease: number of depressive episodes ≥ 2 (p = 0.013), psychotic features (p = 0.038), melancholic features (p=0.025) and premature discontinuation of treatment (p = 0.003).

Conclusions: Our study confirmed that bipolar depression is still underdiagnosed and poorly treated. Questioning a patient about a history of hypomania would be a delicate task and would require the help of a scale, in particular the HCL-20.

Keywords: HCL-20; bipolar depression; bipolar II disorder; hypomania

How does coping influence impulsivity in patients with remitted bipolar disorder?

N. Messedi*, E. Mhiri¹, F. Charfeddine¹, O. Bouattour² and L. Aribi³
¹Psychiatry (b), Hedi Chaker University hospital, sfax, Tunisia; ²Psychiatry, Hedi Chaker University hospital, sfax, Tunisia and ³Psychiatry (b), Hedi Chaker University hospital, sfax, Tunisia
*Corresponding author.
doi: 10.1192/j.eurpsy.2021.534

Introduction: Impulsivity is an important component of the phenomenology of bipolar disorder. Recent studies show that bipolar patients use various strategies to deal with life stressors and with the discomfort related to their disease.

Objectives: To study impulsivity and coping strategies in bipolar patients in remission phase and the factors associated with them.

Methods: A cross-sectional, descriptive and analytical study of 30 patients followed for bipolar disorder, in remission, at the psychiatric outpatient clinic at CHU Hédi Chaker in Sfax. We used a socio-demographic and clinical data sheet, the Ways Of Coping Checklist to assess coping and the Barratt Impulsivity Scale to assess impulsivity.

Results: The average age was 43.77 years, the sex ratio was 0.5. Smoking was found in 30%. Bipolar 1 disorder was diagnosed in 93% of patients. The mean age of onset was 27.8 years, and the mean duration of illness was 15 years. *Impulsivity was found in 20% of cases and was correlated with the duration of the disease (p = 0.016) and smoking (p = 0.009). *Coping focused on the problem present in 70% of patients, correlated with the duration of the disease (p = 0.032) and coping (p=0.02). *Emotion-centered coping revealed in 20% of patients, correlated with gender (p = 0.037) and cognitive impulsivity (p=0.032).

Conclusions: Impulsivity is quite frequent in remitted bipolar patients, who mainly used problem-focused coping and a cognitive management of the stressful event. Thus the hypothesis was that impulsivity is core trait of bipolar disorder.

Keywords: Bipolar; Remitted; Impulsivity; Coping

Specificities of bipolar depression in psychiatric inpatients

M. Kacem¹*, S. Khoudja², S. Brahimi¹, I. Betbou² and L. Zarrouk³
¹Department Of Psychiatry, University hospital of mahdia, Chebba, Tunisia; ²Psychiatry, University Hospital Of Mahdia, Mahdia, Tunisia; ³Department Of Psychiatry, University Hospital of Mahdia, chebba, Tunisia and ⁴Department Of Psychiatry, University Hospital Of Mahdia, Tunisia., Psychiatry, Mahdia, Tunisia
*Corresponding author.
doi: 10.1192/j.eurpsy.2021.535

Introduction: Bipolar depression is not strictly clinically identical to unipolar depression.

Objectives: To describe the clinical characteristics of patients with bipolar depression and to identify factors linked to bipolar depression.

Methods: This is a cross-sectional, descriptive and comparative study carried out at the psychiatric department of the University Hospital of Mahdia. We have included 26 patients with bipolar depression and have compared them to 26 patients with unipolar depression. The data were collected from patients' medical files. The analytical study has been made using Chi² tests. The threshold of p<0.05 was considered as significant.

Results: The mean age was 45 years. The majority of patients were male (61.5%) and unemployed (69.2%). Half of the patients were married. Alcohol consumption was found in 30.8% of cases. Family history of bipolar disorder and attempted suicide were present in 27% and 11.5% of cases respectively. A hospitalization number greater than or equal to 4 was found in 54% of cases. Personal history of suicide attempts was found in 46.2% of cases. At the psychiatric examination, psychomotor retardation, anxiety and psychotic and atypical characteristics were present in 73%, 31%, 42.3% and 7.7% of cases respectively. 46.2% of patients were treated with antidepressants in combination with a mood stabilizer. Antipsychotic treatment was combined in 80.8% of cases. A significant difference was noted for the number of hospitalizations, anxiety and antipsychotic treatment.

Conclusions: An early distinction between bipolar and unipolar disorders is crucial for the treatment of both diseases.

Keywords: Depression; bipolar; inpatients; specificities

Clinical and evolutionary features of bipolar disorder in women

M. Tfifha¹*, W. Abbes², M. Nefoussi¹, M. Abbes³, K. Mdhafar¹, K. Zitoun² and L. Ghanmi²
¹Department Of Psychiatry, regional hospital of gabs, gabs, Tunisia and ²The Department Of Psychiatry, Hospital of gabs, Gabes, Tunisia
*Corresponding author.
doi: 10.1192/j.eurpsy.2021.536
E-P0067

Music composers and bipolar disorders: Where do we stand?

V. Giannouli*

Institute Of Neurobiology, Bulgarian Academy of Sciences, Sofia, Bulgaria

*Corresponding author.
doi: 10.1192/j.eurpsy.2021.537

Introduction: The intersection between bipolar disorders and creativity has been investigated in western literature. Although psychopathology has been proposed for famous artists in painting, writing, music and other forms of art, there is no systematic study examining bipolar disorders and music production in composers.

Objectives: The aim of this review is to investigate this relationship by providing an overview of published studies.

Methods: The search included papers published in English as abstracts as well as in full length until October 2020. The literature search was conducted using the MEDLINE, EMBASE, PUBMED and GOOGLE SCHOLAR databases. For all the searches, the terms/key words that were used were “bipolar disorder”, “music”, “creativity”, and “composers”.

Results: Search results for composers from different music genres and musical periods indicated that the proposed origin of the overall bipolar pattern is attributed to several stressful environmental factors which are taking the form of interpersonal problems regarding the expressed emotion, life events, and paucity of stress-management skills. In addition to that, bipolar psychopathological patterns seem to influence the quantity of music composing activity indirectly due to changes in everyday functional abilities.

Conclusions: Published reports, although based on biographical research, do provide evidence in support of a strong bipolarity-music creativity/production link for famous composers. Further well-designed studies in living music professionals engaged in music composition are needed.

Keywords: bipolar disorder; clinical features; Gender differences; evolutionary features

E-P0070

Pediatric bipolar disorder: Preliminary results of a retrospective study using a nationwide administrative database

A. Campos¹*, M. Gonçalves-Pinho²,³, ⁴, A. R. Ferreira², A. Freitas²,⁴ and L. Fernandes¹,²,⁵

¹Faculty Of Medicine, University of Porto, Porto, Portugal; ²Cintesis – Center For Health Technology And Services Research, Faculty of Medicine, University of Porto, Porto, Portugal; ³Department Of Psychiatry And Mental Health, Centro Hospitalar do Tâmega e Sousa, Penafiel, Portugal, Penafiel, Portugal; ⁴Department Of Community Information And Health Decision Sciences (medics), Faculty of Medicine, University of Porto, Porto, Portugal; ⁵Psychiatry Service, Centro Hospitalar Universitário de São João, Porto, Portugal, Porto, Portugal

*Corresponding author.
doi: 10.1192/j.eurpsy.2021.538

Introduction: Bipolar disorder (BD) is a severe and chronic illness characterized by episodic changes in mood. The average onset of BD symptoms is estimated between 18 and 22 years. However, many adults retrospectively report symptoms onset in childhood or adolescence. Over the last decades, pediatric bipolar disease (PBD) has been the focus of increased attention mainly due to controversies surrounding its prevalence, diagnosis and treatment in the pediatric population.

Objectives: To analyze pediatric hospitalizations related to BD held in mainland Portuguese public hospitals between 2000 and 2015. Methods: This retrospective observational study analyzed all pediatric (<18 years old) inpatient episodes from 2000 to 2015 with a primary BD diagnosis, using an anonymized administrative database including all hospitalization from mainland Portuguese public hospitals. ICD-9-CM codes 296.x were used (excluding codes 296.2x; .3x and .9x). Age at admission, admission type and date, sex, charges and length of stay (LoS) were analyzed.

Results: A total of 348 hospitalizations were analyzed from 258 patients. Patients were mainly young girls (60.6%), with a mean age of 15.24±1.87 years. The majority of the admissions were urgent (81.0%), and the median LoS was 14 days (IQR: 7; 24). Mean hospitalization charges were 5303.1€ with a total sum of 1.2M€ for all the episodes.

Conclusions: PBD hospitalizations occur predominantly in female patients during adolescence. The majority of them are urgent admissions. Descriptive studies will help to describe and characterize sociodemographic and clinical trends in PBD in order to better prevent acute hospitalizations with inevitable social and economic implications.

Keywords: bipolar disorder; Hospital admissions; adolescents; epidemiology