

hoc analysis among the PTSD and DEP groups with respect to the HC one ($p < 0.05$).

Conclusions: Our results suggest the key role of a chronic low-grade inflammatory state in PTSD and in depression, probably related to a dysregulation in HPA axis and cortisol release, with an increase in proinflammatory cytokines including IL-6 that seemed to be more pronounced in PTSD.

Disclosure of Interest: None Declared

EPV0792

Psychoneuroimmunomodulating effect of lymphocytes with ortho-fluoro-benzonal modulated activity in syngeneic long-term alcoholized recipients

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Introduction: Lymphocytes are dysfunctional during long-term ethanol consumption and may contribute the progression from healthy to problem drinking. GABAA receptors are molecular targets of ethanol on lymphocytes, potentiating the effects of alcohol.

Objectives: We first demonstrated that original compound *ortho*-fluoro-benzonal, artificial GABA receptor ligand, has immunostimulating properties and is able to restore long-term alcoholized mice lymphocytes activity *in vitro* through GABAA receptors. Based on the previous results we investigated effects of the *ex vivo* *ortho*-fluoro-benzonal modulated lymphocytes in recipients with experimental alcoholism.

Methods: Male (CBAXC57Bl/6)F1 mice with 6-month 10% ethanol exposure were undergoing the transplantation of syngeneic long-term alcoholized mice lymphocytes, pretreated *in vitro* with *ortho*-fluoro-benzonal. Recipient's ethanol consumption, parameters of the nervous and immune systems functional activities were estimated.

Results: It was shown that lymphocytes modulated *ex vivo* with *ortho*-fluoro-benzonal after intravenous injection caused in syngeneic long-term alcoholized recipients ethanol consumption decrease and stimulation of behavioral activity in the "open field" test against the background of changes in the level of a number of cytokines in pathogenetically significant brain structures. Stimulation of humoral immune response, estimated by the relative number of antibody-forming spleen cells was also detected in recipients after lymphocytes transplantation. The injected immune cells were recorded in the parenchyma of the spleen and brain of recipients, which suggests, in particular, their direct influence on these functions.

Conclusions: Results demonstrated that transplantation of *ortho*-fluoro-benzonal-modulated lymphocytes caused positive psychoneuroimmunomodulating effect in long-term alcoholized recipients, which makes it possible to consider adoptive immunotherapy as a promising method in the treatment of alcoholism.

Disclosure of Interest: None Declared

EPV0793

Central effects of peripherally administered immune cells modulated by a psychoactive substance in aggression

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Introduction: It is known that the formation of aggressive behavior is accompanied by neurodegenerative and neuroinflammatory changes. Immune cells have a regulatory effect on the central nervous system functions, including regulation of behavior.

Objectives: We first demonstrated that *ex vivo* chlorpromazine - modulated immune cells have a positive aggressive behavior editing effect. The aim of the study was to investigate the influence of the indicated cells on some central mechanisms underlying the development of aggressive reactions.

Methods: (CBAXC57Bl/6) F1 aggressive male mice, developed in conditions of chronic social stress, were undergoing the transplantation of syngeneic spleen lymphocytes with *ex vivo* chlorpromazine-modulated functional activity. In recipients the immunohistochemical analysis was performed assessing the expression of the microglial marker Iba1. The levels of brain-derived neurotrophic factor (Bdnf) and cytokines was assessed by ELISA. For histological examination Nissl staining was applied.

Results: Aggressive behavior editing after the chlorpromazine-modulated immune cells transplantation registered against the background of some structural and functional changes in the brain. It was found an increase in the density of pyramidal neurons in CA1 and CA3 hippocampal regions and augmented level of Bdnf. The decreased expression of microglial activation marker Iba1, accompanied with decreased levels of pro-inflammatory cytokines (IL-1 β , IL-2, IL-6, INF- γ) and increased anti-inflammatory (IL-4) cytokine was found. Visualization of functionally active lymphocytes pre-treated with chlorpromazine in the brain parenchyma of aggressive recipients suggests a direct effect of injected lymphocytes on CNS.

Conclusions: The effect of chlorpromazine - modulated immune cells that edits aggressive behavior is realized by stimulating neurogenesis, neuroplasticity and reducing neuroinflammation.

Disclosure of Interest: None Declared

EPV0794

Psoriasis and Schizophrenia: An immunological link

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Introduction: Schizophrenia has progressively been seen as a multifactorial disease, with its pathogenesis including immune dysfunction. Studies have leaned into the activation of brain inflammation, influencing the development of schizophrenia in certain subgroups of patients. Additionally, the role of the T helper (Th17) cells and neuromediators associated are implicated in the pathophysiology of psoriasis, a chronic immune-mediated dermatological condition. A significantly elevated risk was found with 41% increased odds of schizophrenia compared with subjects without psoriasis. The concomitant diagnosis of both illnesses has motivated further investigation into their shared pathways.

Objectives: Characterize the prevalence of psoriasis in patients with schizophrenia and mutual involved mechanisms.

Methods: Retrospective analysis of inpatients of a Portuguese Psychiatry department with the established diagnosis of Schizophrenia, between 2018 and 2022. Additionally a literature review on the topic was conducted.

Results: A sample of 94 patients admitted was obtained. The majority of patients were male (80,1%). The prevalence of the diagnosis of Psoriasis was 6,4% (n=6). A previous epidemiological study conducted in the Portuguese general population concluded that the prevalence of psoriasis is on average 4,4%, which is inferior to the value obtained in our sample. Other studies that measured the relationship between both diagnoses corroborated our results, documenting higher prevalences of psoriasis in patients with schizophrenia than the general population.

Conclusions: The relationship between psoriasis and schizophrenia seems to be bidirectional, with schizophrenia patients having higher risk of psoriasis and psoriasis patients having higher risk of schizophrenia. This could be explained by multiple mechanisms, mainly the activation of Th17 cells but also the fact that there may be a genetic susceptibility due to proximal chromosome loci associated with both diseases (chromosome 6p21.3). This information is essential in providing care to patients because treatment must be carefully adapted. It has been demonstrated that atypical antipsychotics might worsen psoriatic manifestations and immunosuppressive agents are linked to psychotic episodes and worse mental health. Thus, there should be increased alertness for the detection of these conditions in patients with either one of them.

Disclosure of Interest: None Declared

EPV0795

A study on the complex interplay between inflammation and severe mental disorders (SMInflam)

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Introduction: An alteration of inflammatory indices has been reported in several major mental disorders. This alteration seems to be related to disease severity and treatment resistance, but its pathophysiological meaning remains to be established. Patients with severe mental disorders tend to have increased levels of circulating cytokines and increased microglial activity in the central nervous system, suggesting that inflammation may contribute to

the onset, or chronicity, of mental disorders. Detecting inflammation-relevant symptom clusters across mental disorders may represent an important step towards precision medicine in psychiatry.

Objectives: The SMInflam project is a longitudinal, observational, real-world study which aims to: assess a set of inflammatory indices at baseline in a sample of patients with the diagnosis of a major mental disorder; identify inflammatory profiles of these patients using a latent class analysis approach; assess the response to pharmacological treatments of patients with different inflammatory profiles; re-assess the inflammatory indices and profiles at several times during follow-up and test their correlation with the evolution of psychopathology.

Methods: The sample will consist of 50 patients with a diagnosis of a major mental disorders consecutively enrolled at the outpatient unit of the Department of Psychiatry of University of Campania. All enrolled patients will be administered a set of reliable and validated psychopathological assessment tools. We will perform a complete physical evaluation, and a battery of laboratory tests. Peripheral markers of chronic inflammation will be assessed. Clinical and biological assessments will be performed at baseline (T0) and after 3 and 6 months (respectively, T1 and T2).

Results: Expected results include the evaluation of the levels of inflammatory indices in a varied sample of patients with severe mental disorders. According to the pre-post design, these aspects will be evaluated before the start and at the follow-up. We will also take into consideration the role of confounding factors such as age and gender, which represent a critical biological variable influencing such inflammatory pathways.

Conclusions: Collected data will be used for having a more informative, reliable and valid characterization of psychopathology in a vast sample of patients with severe mental disorders. Our study may represent the first of a new wave of methodologically-sound studies on the role of inflammation and psychopathology in patients with severe mental disorders.

Disclosure of Interest: None Declared

EPV0796

Limbic encephalitis – A case report of atypical dementia syndrome with potentially therapeutic consequence

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Introduction: Limbic encephalitis (LE) is a subacute or chronic, non-infectious inflammation of the brain, usually occurring in adulthood, with predominant involvement of mesiotemporal structures and a clinical manifestation consisting mainly of new memory impairment, affective disorder, temporal lobe epilepsy, psychoses, etc.

Objectives: To point out the importance of knowledge of potentially treatable dementia syndromes such as atypical manifestation of probably LE.

Methods: We present a clinical case of a 47-years-old woman with an atypical dementia syndrome and typical radiological findings