

controlled trials and six case reports studying the effects of NAC in patients suffering from trichotillomania (one performed in adults and the other one in infants) were included. Only the one performed in adults showed improvement when adding NAC to the treatment using the Massachusetts General Hospital, Hairpulling Scale (MGH-HPS). Four case reports and two randomized controlled trials included patients with excoriation disorder showed statistical differences in all of them. Three case reports and one randomized controlled trial in patients with onicotyloomania showed a difference that wasn't consistent after two months of treatment.

Conclusions: There are multiple case reports and several clinical trials supporting both the safety and efficacy of NAC in the treatment of body-focused repetitive behavior disorders. Based on these positive preliminary results and the absence of serious adverse effects, carrying out a therapeutic trial with NAC is a plausible option in the management of this pathology, especially in those in which other therapeutic options have not been effective. Further studies are needed to develop a treatment algorithm and elucidate the difference in the efficacy of NAC between children and adults with this disorder.

Disclosure of Interest: None Declared

EPP0113

Fusiform Gyrus is Related to Subclinical Social Anxiety in Healthy Individuals

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Introduction: Subclinical or subthreshold social anxiety (SSA) is associated with significant burden. Up to 20% of general population report subclinical social anxiety symptoms, which can change individual social, work functioning.

Objectives: However, neural mechanisms of SSA have not been fully investigated in healthy individual yet. This study aimed to examine the relationship between gray matter volumes (GMVs) and SSA.

Methods: We enrolled a total of 57 healthy individuals with SSA. The General Anxiety Disorder-7 (GAD-7), Beck Depression Inventory-II (BDI-II), Beck Anxiety Inventory (BAI), and Albany Panic and Phobia Scale (APPQ) were evaluated. Freesurfer was applied to investigate the relationship between SSA and GMVs. Multiple regression models with age, sex, and total intracranial volume as covariates were performed. Pearson correlation analyses also investigated the exploratory correlations between the GMVs of the SSA-related regions and other psychological characteristics among healthy individuals.

Results: Freesurfer voxel-wise correlational analyses showed a significant negative correlation between the SA scores of APPQ and gray matter volumes (GMVs) in the fusiform gyrus (FG). In addition, the GMVs in the FG were significantly negatively associated with the total GAD-7, BDI-II, BAI, and APPQ scores. Performance anxiety was significantly correlated with posterior cingulate gyrus, parahippocampal gyrus and fusiform gyrus.

Image:

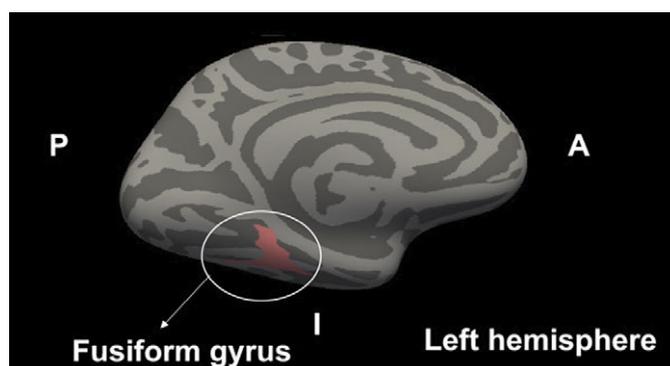


Fig.1 The significant negative correlation between the social anxiety scores and the GMVs in the cluster including left fusiform gyrus in healthy individuals (Monte Carlo simulations correction, cluster wise $p < 0.05$)

Conclusions: Our findings suggest that healthy individuals with SSA showed decreased GMVs in the FG and the GMVs of FG were associated with general anxiety and depression symptomatology.

Disclosure of Interest: None Declared

EPP0114

Setting the research agenda for medically not yet explained symptoms (MNYES): a priority-setting partnership of patients, caregivers and clinicians

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Introduction: This study establishes research priorities for Medically Not Yet Explained Symptoms (MNYES). A significant number of patients suffer from these symptoms, also known as MUS, that are likely to cause work disability and impact on quality of life. Research into MNYES in general has been poorly funded over the years, has been primarily researcher-led, and was sometimes controversial.

Objectives: To identify research priorities from the perspective of patients, caregivers and clinicians, following the James Lind Alliance (JLA) priority setting partnership (PSP) method.

Methods: The PSP Steering Group termed these symptoms Medically Not Yet Explained Symptoms (MNYES). This was an operational definition not intended to add to or replace other definitions already in use, that was constructed to embrace the views of all stakeholders. The nomenclature MNYES was chosen to indicate our incomplete understanding of these conditions. This could pertain to biological, psychological and social factors, as well as

factors involving the trajectory of patients through various health-care settings.

The study involved five key stages: defining the appropriate term for the conditions under study by the PSP Steering Group; gathering questions on MNYES from patients, caregivers and clinicians in a publicly accessible survey; checking these research questions against existing evidence; interim prioritisation in a second survey; and a final multi-stakeholder consensus meeting to determine the top 10 unanswered research questions using the modified nominal group methodology.

Results: Over 700 responses from UK patients, caregivers and clinicians were identified in two surveys from a broad range of medical specialities and primary care. Patients prioritised research questions regarding diagnosis and aetiology; clinicians and caregivers prioritised outcomes and treatment, relatively.

The top 10 unanswered research questions cover the domains of: treatment; the role of clinicians; symptoms and outcomes; and recovery.

Conclusions: This JLA PSP may well be the first attempt at capturing the thoughts of a wide group of medical professionals, patients and caregivers in one place with the aim eventually of standardising care and reducing unhelpful variability in the management of MNYES. Following the JLA approach is a strength of the study. The choice of the term MNYES conveys a message of hope, which responds to a need identified by patients, carers and clinicians alike for vigorous research in this domain. The research priorities are expected to generate much-needed, relevant and impactful research into MNYES. Better funding possibilities for MNYES are urgently needed.

Disclosure of Interest: None Declared

EPP0115

Panic Attacks and Cervical Pain: Outcomes of Traditional and Anti-Oxydative Therapy

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Introduction: Panic attacks (PA) or episodic paroxysmal anxiety are attacks of severe anxiety (panic) or fear (most often - fear of death, less often - fear of losing consciousness, loss of control, helplessness or fear of “going crazy”), accompanied by a rapid heartbeat and a feeling of “suffocation”, “lack of air.” Sometimes there are additional symptoms such as increased blood pressure, a feeling of “internal trembling”, trembling in the limbs, a feeling of “hot flashes” of heat or cold, numbness of the extremities, increased sweating, a feeling of “unstableness” or dizziness, nausea, derealization or depersonalization.

Objectives: It was revealed that many patients with cervical and spinal pain suffer from PA. Psychotherapy and traditional psychopharmacology treatment often not effective. The goal of our study was analysis of radical anti-oxidative therapy for the PA patients in addition to traditional to traditional psychopharmacology and psychotherapy techniques.

Methods: 12 patients with cervical and 31 with lumbar pain experienced panic attacks during outbreaks of panic attacks. 6 cervical

pain patient and 17 patients with lumbar pain were treated by antipsychotic medications also by cognitive behavioral therapy, hypno-suggestive therapy and autogenic training. Other patients also receive hyperbaric oxidation therapy (HBO) in addition to psychopharmacology and psychotherapy.

Results: It was revealed that patients with PA comorbid with vertebral pathology had much better effects in terms of evading of psychopathologic outcomes. PA became much more rarely and finally disappeared at all. The anti-oxidative treatment was also very beneficial for neurologic symptoms cause by vertebral pain.

Conclusions: Anti-oxidative therapy showed very marked effect. In this regard, new anti-oxidative treatment seems to be promising for management of such conditions.

Disclosure of Interest: None Declared

EPP0116

Determinants of Generalized Anxiety Disorder Symptoms in Residents of Fort McMurray 12 Months Following the Devastating Flooding In 2020

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Introduction: The flood in Fort McMurray (FMM) which occurred between April 26 and May 2, 2020, is known to have displaced an estimated population of 1,500 people, and destroyed or damaged about 1,230 buildings. In all, it is estimated to have caused about \$228 million in losses.

Objectives: This study aims to identify the determinants of likely Generalized Anxiety disorder (GAD) among respondents 12 months after the 2020 flooding

Methods: Data for the study were collected through a cross-sectional survey sent through REDCap and hosted online from the 24th of April to the 2nd of June 2021. The self-administered questionnaire was emailed to respondents using community, government, school, and occupational platforms. Demographic, flooding-related variables and clinical data were collected. A validated instrument, the GAD-7 was used to collect information on likely GAD. Consent was implied by completing the survey forms, and the University of Alberta Health Research Ethics Committee approved the study.

Results: Of the 249 residents surveyed, 74.7% (186) respondents completed the online survey, 81.6% (80) were above 40 years, 71% (132) were in a relationship, 85.5% (159) were females, and 94.1% (175) were employed. The prevalence of likely GAD was 42.5% in our study. Predictors of likely GAD among respondents included positive employment status (OR = 30.70; 95% C.I. 2.183–423.093), prior diagnosis of depression (OR = 3.30; 95% C.I. 1.157–9.43), and the perceived need to have mental health counseling (OR = 6.28; 95% C.I. 2.553–15.45).

Conclusions: This study showed that there was an increased magnitude of moderate to high anxiety symptoms among respondents following the natural disaster, particularly the flood in 2020. The predictors of likely GAD include positive employment status, a