

cannabis and cocaine (e.g. cannabis, OR 3.18, 2.75 to 3.70). All significant differences survived controls for age and ethnicity. After adjustment for illicit substance use gender differences in aggression, agitation, paranoia and grandiosity became insignificant ($p > 0.05$). However, adjustment for illicit substance use resulted in increased strength of gender associations with negative, manic and depression symptoms.

Discussion: There are clear gender differences in the clinical presentation of FEP which are modified by exposure to illicit substances. These findings highlight a need to better understand the impact of gender on clinical presentation and treatment outcomes in psychosis, and to ensure that clinicians are aware of how gender differences in presentation could be modified by illicit substance use.

T128. ATTACHMENT REPRESENTATIONS IN CHILDREN AT FAMILIAL HIGH RISK OF SEVERE MENTAL DISORDERS. ASSOCIATIONS WITH PSYCHOPATHOLOGY, LEVEL OF FUNCTIONING, AND PSYCHOTIC EXPERIENCES

Maja Gregersen*¹, Ditte Vestbjerg Ellersgaard¹, Anne Søndergaard¹, Camilla Christiani¹, Nicoline Hemager¹, Katrine Søborg Spang², Birgitte Klee Burton², Md Jamal Uddin¹, Jessica Ohland¹, Ditte Gantriis³, Aja Greve³, Ole Mors³, Kerstin Jessica Plessen⁴, Merete Nordentoft¹, Lars Clemmensen⁵, Jens Richardt Møllegaard Jepsen¹, Anne Amalie Elgaard Thorup²

¹CORE - Copenhagen Research Centre for Mental Health, Mental Health Services in the Capital Region of Denmark, Mental Health Centre Copenhagen; ²Mental Health Services in the Capital Region of Denmark, Child and Adolescent Mental Health Centre; ³Aarhus University Hospital; ⁴University Hospital, Lausanne; ⁵Center for Telepsychiatry, Mental Health Services, Region of Southern Denmark

Background: There is evidence of higher rates of insecure and disorganized attachment in infancy in children born to parents with severe mental disorders, but evidence on attachment in middle childhood for these children is lacking. This study aims to explore attachment representations in seven-year-old children born to parents with schizophrenia or bipolar disorder. We also aim to explore possible associations between attachment and psychopathology, level of functioning, and psychotic experiences in these children.

- We expect that children at familial high risk will have the highest levels of insecure and disorganized attachment. We expect that population based controls will have the lowest levels of insecure and disorganized attachment and higher levels of security than children at familial high risk.
- We expect higher levels of insecure and disorganized attachment to be associated with an increased risk of psychopathology, and psychotic experiences and with lower levels of functioning, whereas we expect higher levels of secure attachment to be associated with a lower risk of psychopathology, and psychotic experiences, and with higher levels of functioning.

Methods: The Danish High Risk and Resilience Study VIA 7 is a prospective cohort study of 522 seven-year-old children born in Denmark. The cohort consists of children where one or both parents have been diagnosed with a schizophrenia spectrum disorder (N=202), children where one or both parents have been diagnosed with bipolar affective disorder (N=120) and children where neither of the parents have been diagnosed with these disorders (N=200). Attachment representations were assessed with the Story Stem Assessment Protocol whereas psychopathology, level of functioning, and psychotic experiences were assessed with K-SADS.

Results: Data analyses are ongoing but preliminary results indicate that there are no significant differences in attachment representations between

the three groups of children, but that there are associations between higher rates of insecure and disorganized attachment and a higher risk of psychopathology. Results will be presented at the SIRS-conference.

Discussion: Understanding attachment and its correlates in children at familial high risk of severe mental disorders is important in order to strengthen our understanding of developmental trajectories towards mental disorders in these children.

T129. PHARMACOLOGICAL INTERVENTIONS IN TRIALS OF PEOPLE WITH SCHIZOPHRENIA: A REGISTER-BASED CLASSIFICATION OF SEVENTY YEARS OF RESEARCH

Farhad Shokraneh*¹

¹School of Medicine, University of Nottingham

Background: Drug development is a billion dollar business globally. It is crucial to stay up to date on drug developments all over the world any repetition will be irreversible waste of resources. The only way to keep up with all the development is to keep a living database of all trials running for each condition and covering all studies from every country in any language. An Information Specialist collects and classifies all pharmacological interventions from all schizophrenia trials.

Methods: Cochrane Schizophrenia's Study-Based Register was developed and used as the source of trials, Emtree and MeSH for synonyms, AdisInsight and CT.gov for research drugs and WHO ATC for marketed drugs. This research took four years from 17 December 2014 and 6 January 2019 and involved 18,500 randomized controlled trial from 90 countries in 23 languages.

Results: One third of tested interventions on patients with schizophrenia are pharmacological (816; belonging to 106 clinical classes) with antipsychotic drugs being the most researched (15.1%). Only 528 of these medications are listed in WHO ATC. Around one third of these drug interventions are seen only in research (236; from 21 pharmacological/biochemical classes). Within the pharmacological evaluations we identified 28 'qualifiers' including dose, route, and timing of drug delivery. Using Data Science approaches, this research revealed unique antipsychotic drugs that are being prescribed only in certain countries such as Japan but the West is not aware of them. This research is also revealed all the research drugs and current trends in developing drugs in pharmaceutical companies.

Discussion: Classification of medication interventions from trials requires use of many sources of information none of which are inclusive of all drugs. Without a global search in all languages the pharmaceutical companies and researchers are missing important successful developments from non-English speaking world. The cycle of developing research/withdrawn drugs does not stop and may end in veterinary medicine, doping agents in sports, and illicit drug market.

T130. A SURVEY OF MENTAL HEALTH LITERACY USING THE INTERNET IN JAPAN

Taiju Yamaguchi*¹, Yoshiyo Oguchi², Yasutaka Ojio³, Ryoichi Mori⁴, Minako Oooka¹, Yoko Baba¹, Tomoyuki Funatogawa¹, Naoyuki Katagiri¹, Naohisa Tsujino¹, Takahiro Nemoto¹, Masafumi Mizuno¹

¹School of Medicine, Toho University; ²St. Marianna University School of Medicine; ³National Institute of Mental Health, National Center of Neurology and Psychiatry; ⁴Tokai University

Background: Insufficient mental health literacy (MHL) of the general public is one of the major factors that prevent early intervention for mental illness. Insufficient MHL may exacerbate the stigma attached to people with mental illness. In Japan, there have been few large-scale surveys to