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Conclusions: Decision-making ability shows alterations in patients with a history of suicidality and depression, confirming the findings of previous studies. Furthermore, an impaired or dysfunctional decision-making ability may potentially be a predictor of suicidal behaviour in patients with depression, a possibility that could be a reason for further research in this field, both in the context of investigating predictors and in developing appropriate treatments for these patients.

Disclosure of Interest: None Declared

EPP0073

The Global Burden of Suicidal Behavior Among People Experiencing Food Insecurity: A Systematic Review and Meta-analysis

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Introduction: Food insecurity has become a growing burden within a global context where climate change, catastrophes, wars, and insurgencies are increasingly prevalent. Several studies have reported an association between suicidal behaviors (i.e., suicide ideation, plans, and attempts) and food insecurity. This meta-analytic review for the first time, synthesized the available literature to determine the pooled prevalence of suicidal behaviors among individuals experiencing food insecurity, and examined the strength of their association.

Objectives: To determine the pooled prevalence of suicidal behaviors among individuals experiencing food insecurity, and examine the strength of their association.

Methods: Databases (*Ovid, PubMed, Web of Science, and CINAHL*) were searched using the appropriate search term from inception to July 2022. Eligible studies reporting the number/prevalence of suicidal behaviors among individuals experiencing food insecurity or the association between food insecurity and suicidal behaviors were included. The pooled prevalence of suicidal behaviors was determined using the random-effects model. The review was registered with PROSPERO (CRD42022352858).

Results: A total of 47 studies comprising 75,346 individuals having experienced food insecurity were included. The pooled prevalence was 22.3% for suicide ideation (95% CI: 14.7-29.9; I^2 =99.6%, p<0.001, k=18), 18.1% for suicide plans (95% CI: 7.0-29.1; I^2 =99.6%, p<0.001, k=4), 17.2% for suicide attempts (95%) CI: 9.6-24.8; I^2 =99.9%, p<0.001, k=12), and 4.6% for unspecified suicidal behavior (95% CI: 2.8-6.4; *I*²=85.5%, *p*<0.001, k=5). There was a positive relationship between experiencing food insecurity and (i) suicide ideation (aOR=1.049 [95% CI: 1.046-1.052; I^2 =99.6%, p<0.001, k=31]), (ii) suicide plans (aOR=1.480 [95%] CI: 1.465-1.496; I^2 =99.1%, p<0.001, k=5]), and (iii) unspecified suicide behaviors (aOR=1.133 [95% CI: 1.052-1.219; I^2 =53.0%, p=0.047, k=6]). However, a negative relationship was observed between experiencing food insecurity and suicide attempts (aOR=0.622 [95% CI: 0.617-0.627; $I^2 = 98.8\%$, p<0.001, k=15]). The continent and the countries income status where the study was conducted were the common cause of heterogeneity of the differences in the odds of the relationships between experiencing food insecurity and suicidal behaviors - with North America and high-income countries (HICs) having higher odds. For suicide attempts, all non HICs had a negative relationship with food insecurity.

Conclusions: There is a high prevalence of suicidal behaviors among individuals experiencing food insecurity. Initiatives to reduce food insecurity would likely be beneficial for mental wellbeing and to mitigate the risk of suicidal behaviors among population experiencing food insecurity.

The paradoxical finding of suicide attempts having a negative relationship with food insecurity warrants further research.

Disclosure of Interest: None Declared

EPP0074

Examining the Effects of COVID-19 on Suicide Attempts in Budapest: A Focus on Violent and Non-Violent Attempts

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Introduction: In Hungary, in contrast to most other countries, suicide deaths increased significantly during the first year of the COVID-19 epidemic (March to December 2020). Globally, the burden of emergency care in the healthcare system tended to decrease during the first period of the epidemic.

Objectives: Our research aimed to evaluate the changes in the number of intentional suicide attempts by violent and non-violent means during the first two years of the epidemic, compared to the trend before March 2020 in the Budapest metropolitan area and Pest County.

Methods: We analyzed psychiatric assessment reports of self-poisoning patients admitted to Péterfy Hospital's Emergency Department and Clinical Toxicology from Jan 2019 to Dec 2021 to estimate non-violent suicide attempt trends. We analyzed patient data for violent suicide attempts treated at Dr. Manninger Jenő Trauma Centre from 2016-2021, focusing on trends during the first two years of the pandemic. Negative binomial regression estimates were used for interrupted time series analysis with Prais-Winsten regression, controlling for time and seasonal and autoregressive effects. We used change-point detection to examine the leveling of trends. The Institutional Review Board approved the research in both institutions. Approval numbers: 08-2022 (Péterfy Hospitaly) and 19-2021 (Traumatology Center).

Results: The number of male non-violent suicide attempts decreased by 16.6% compared with the pre-epidemic period (p<0.001). A similar and significant decrease was observed in females and in the total population (Image 1). The female and total population trends, i.e., the decrease, were reversed by August 2020,

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and the male trends were reversed by October 2020. The total number of patients treated for violent suicide attempts increased significantly (p<0.05) during the first two years of the pandemic (Image 2). There was a slight increase in violent attempts in men and a small decrease in women, but these changes are not statistically significant.

Image:

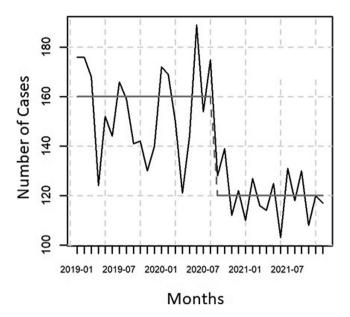
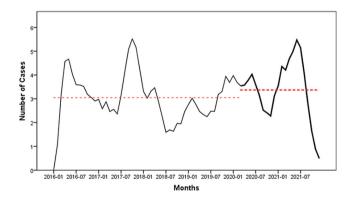


Image 2:



Conclusions: We hypothesize that those who tried to end their life through non-violent drug use were less inclined to seek assistance because they were concerned about being hospitalized during the COVID-19 outbreak. The surge in violent attempts is striking, as it correlates with the rise in suicide fatalities documented in Hungary during the initial year of the outbreak. Our data was obtained from two prominent public hospitals in Budapest, enabling us to conduct a more concentrated and thorough examination of the circumstances in the capital.

Disclosure of Interest: None Declared

EPP0075

Suicidal thoughts and behaviors (STB) among psychiatric emergency patients at the emergency unit of a university hospital in Belgium (UZ Leuven). A twenty year perspective using cross-sectional data.

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Introduction: Suicidal thoughts and behaviors (STB) are a serious public health problem. Suicide prevention programs have been established over the years, but many people who are suicidal do not seek treatment, and when they do, they end up in low-threshold sectors such as the Emergency Department in general hospitals. Previous studies about STB at the ED are mostly narrative, rather than a date-driven approach and limited in sample size .

Objectives: This study describes the prevalence and evolution over time of suicidal ideation (SI) and suicidal attempts (SA) in terms of sociodemographic, clinical and service use variables of the psychiatric patient referred to the Emergency Department of the University Hospital Gasthuisberg (Leuven, Belgium) over a 20 year period. **Methods:** During a 20 year period (2002-2022), all patients with a psychiatric referral to the Psychiatric Emergency Department (PED) of the University Hospital Gasthuisberg (Leuven) were included (N~18.000). We use descriptive statistics to summarize the data set, focusing on STB in terms of sociodemographic, clinical and service use variables.

Results: Around 1/10 patients presents with SA; another 1/5 with SI. Despite several reforms, SI and SA have remained relatively stable over the years. Notably, there is a higher prevalence of referrals for females in both SI and SA compared to males. However, there has been a notable increase in male SA cases over time. In the age group 36-49, both sexes exhibit the highest percentages of SI and SA cases, with exception for women in SI, where the age category 18-25 has the most referrals. Approximately one-third of male patients referred with STB have never accessed outpatient care, underscoring a critical gap in mental health services for this demographic.

Conclusions: Despite several reforms in mental health care, the PED remains a major entry point into mental healthcare for large proportions of STB patients.

Disclosure of Interest: None Declared

Addictive Disorders

EPP0076

Alcohol and Sedative Use Disorders in the Lebanese Population: Role of Sleep and Psychiatric Factors

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