

## EPV1601

### Suicide and Related Factors in Parkinson's Disease

G. Çakar<sup>1\*</sup>, B. Duman<sup>2</sup>, C. Akbostancı<sup>3</sup> and H. Kumbasar<sup>2</sup>

<sup>1</sup>Aksaray University Training And Research Hospital, Psychiatry, Aksaray, Turkey; <sup>2</sup>Ankara University Faculty of Medicine, Psychiatry, Ankara, Turkey and <sup>3</sup>Ankara University Faculty of Medicine, Neurology, Ankara, Turkey

\*Corresponding author.

doi: 10.1192/j.eurpsy.2022.2186

**Introduction:** Parkinson's disease(PD) is a progressive, neurodegenerative nervous system disease. Psychiatric symptoms are common in PD, it is important to consider the suicide risk of these patients.

**Objectives:** The aim of this study is to investigate the risk of suicide in PD with a case control study and to determine the factors that may be associated.

**Methods:** 126 Parkinson's patients and 117 age, gender matched healthy controls were included. Montreal Cognitive Assessment Scale(MoCA), Suicide Probability Scale(SPS), Beck Hopelessness Scale(BHS), Apathy Rating Scale(AES) and Multidimensional Scale of Perceived Social Support(MSPSS) were completed by participants. The PD group completed Parkinson's Disease Quality of Life Questionnaire(PDQ-39) and data on disease duration, Movement Disorders Society-Unified Parkinson's Disease Rating Scale(MDS-UPDRS), levodopa-equivalent daily doses(LEDD) were obtained. Hamilton Anxiety Rating Scale(HAM-A) and Hamilton Depression Rating Scale(HAM-D) were administered to all participants.

**Results:** SPS total scores were significantly lower and total scores of HAM-A, HAM-D and MSPSS were found to be significantly higher in the PD group. There was no significant difference between the two groups in terms of BHS total scores. In PD group a linear relationship was found between SPS total scores and BHS, PDQ39, HAM-A and HAM-D and an inverse relationship with AES. In the regression analysis, it was concluded that a one-unit increase in BHS total scores increased the probability of suicide by 17.1%.

**Conclusions:** It is seen that SPS scores in patients are lower than controls and observed that SPS is correlated with hopelessness, depression, anxiety and quality of life. Although the possibility of suicide is found to be low in PD, this risk increases in patients with untreated depression and anxiety. Therefore, psychiatric evaluation may be recommended in these patients.

**Disclosure:** No significant relationships.

**Keywords:** Depression; Suicide; hopelessness; Parkinson's Disease

## EPV1600

### Moral Injury and Suicide Ideation Among Combat Veterans: The Role of Trauma-Related Shame and Collective Hatred

Y. Levi-Belz<sup>1\*</sup>, G. Zerach<sup>2</sup>, G. Schwartz<sup>1</sup> and E. Halperin<sup>1</sup>

<sup>1</sup>Ruppin Academic Center, The Lior Tsfaty Center For Suicide And Mental Pain Studies, Emek Hefer, Israel and <sup>2</sup>Ariel University, Psychology, Ariel, Israel

\*Corresponding author.

doi: 10.1192/j.eurpsy.2022.2187

**Introduction:** Exposure to potentially morally injurious events (PMIEs) among combat veterans has been acknowledged as a significant stressful combat event that may lead to mental health problems, including suicide ideation (SI). Several studies have examined the risk and protective factors that can explain the

conditions in which PMIEs may contribute to the development and maintenance of SI. However, the contribution of social-emotional factors has yet to be examined.

**Objectives:** In the current study, we examined the association between PMIE-Self and SI among combat veterans and explored the mediating role of trauma-related shame and the moderation role of collective hatred in this association.

**Methods:** A volunteer sample of 336 Israeli combat veterans was recruited, completing self-report questionnaires in a cross-sectional study.

**Results:** indicated that PMIE-Self was positively associated with SI, and trauma-related shame mediated this association. Moreover, collective hatred moderated both their direct (PMIE -SI) and indirect (PMIE-Shame-SI) association. Notably, collective hatred had an inverse role for each of the associations. Thus, collective hatred was found to comprise both a risk and a protective factor for SI following PMIE-Self.

**Conclusions:** The current findings highlight the crucial contribution of trauma-related shame and collective hatred to the association between moral injury and suicidality. Moreover, the findings demonstrate that even years after their military service release, combat veterans exposed to PMIEs may still feel consumed by painful memories and maintain premonitions of a foreshortened future. Furthermore, the findings help to better understand the dynamics of collective hatred and the challenge of modifying it.

**Disclosure:** No significant relationships.

**Keywords:** trauma-related shame; Moral Injury; suicide ideation; Veterans

## EPV1601

### Associated factors of repeated suicidal behavior

O. Charaa<sup>1\*</sup>, A. Aissa<sup>2</sup>, N. Sayari<sup>1</sup>, Z. Yosra<sup>1</sup>, S. Meddouri<sup>2</sup>, U. Ouali<sup>1</sup> and R. Jomli<sup>1</sup>

<sup>1</sup>Razi hospital, Psychiatry A Department, manouba, Tunisia and <sup>2</sup>Razi hospital, Psychiatry A Department, Manouba, Tunisia

\*Corresponding author.

doi: 10.1192/j.eurpsy.2022.2188

**Introduction:** Suicide is a dramatic suicidality complication and a significant worldwide public health problem. Sixty percent of suicidal deaths are preceded by at least one suicide attempt.

**Objectives:** to search and estimate the factors predicting a suicidal recidivism

**Methods:** We conducted a retrospective descriptive survey, achieved in psychiatric department A of Razi hospital on 60 patients hospitalized during a period of 10 years (from January 2010 to December 2019) and have committed at least a suicide attempt. Data collected from medical folders in order to explore sociodemographic and clinical characteristics of the patients.

**Results:** The mean age of the sample was 30 years. A high prevalence of female was objectified. There were a low level of education for 53%, most of patients (55%) were unemployed and came from urban area. Among our patients, 39% attempted suicide for a one time. 61% of patients attempted suicide for several times. The main risk factors related to recidivism of suicidal behavior were unemployment, family history of psychiatric disorders and family instability.

**Conclusions:** The analysis of these results justifies preventive actions in order to face the increase of suicidal recidivism by searching for these associated factors. Therefore, a multidisciplinary intervention approach is required.

**Disclosure:** No significant relationships.

**Keywords:** Associated factors; Suicide; Recidivism

## EPV1602

### Suicidal thoughts and behaviors (STB) among psychiatric emergency patients at the emergency unit of a university hospital in Belgium (UZ Leuven) . A longitudinal approach with data from 2003-2015

L. Van Eldere<sup>1,2,\*</sup>, S. Claes<sup>3</sup>, W. Voorspoels<sup>1</sup>, C. Yurdadon<sup>1</sup>, M. Sabbe<sup>4</sup> and R. Bruffaerts<sup>1</sup>

<sup>1</sup>KU Leuven, Public Health Psychiatry, Leuven, Belgium; <sup>2</sup>UPC KU Leuven, Quality And Operational Policy, Kortenberg, Belgium; <sup>3</sup>KU Leuven, Mind- Body Research, Leuven, Belgium and <sup>4</sup>KU Leuven, Public Health And Primary Care, Leuven, Belgium

\*Corresponding author.

doi: 10.1192/j.eurpsy.2022.2189

**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 will end up in low-threshold sectors such as the Emergency Department in general hospitals. Previous studies about STB are mostly narrative, rather than a date-driven approach and limited in sample size.

**Objectives:** The main goal of this study is to describe the prevalence and evolution of STB (ideation, plan or attempt) of the psychiatric patient referred to the Emergency Department of the University Hospital Gasthuisberg (Leuven, Belgium) over a 12 year period.

**Methods:** During a 12 year period (2003-2015), all patients with a psychiatric referral to the Psychiatric Emergency Room (PER) of the University Hospital Gasthuisberg (Leuven, Belgium) were included (N=25.000). We use descriptive statistics to summarize the data set, focusing on STB in terms of raw numbers, symptoms at referral, mental disorders and demographic characteristics.

**Results:** Around 1/9 patients presents with suicide attempt; another 1/5 with suicidal thoughts. STB accounts for 35% of psychiatric primary complaints at the PER. Women were more likely to present with STB. The proportion of STB referrals remains stable over the years.

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

**Disclosure:** No significant relationships.

**Keywords:** Suicide; Suicidal thoughts and behaviors; Emergency Department

## Training in Psychiatry

### EPV1603

#### Telesimulation for medical students during the COVID-19 pandemic: experiences and student and faculty evaluation from a UK medical school

H.T.T. Leung<sup>1,\*</sup>, J. Whall<sup>1</sup>, H. Bruce<sup>1</sup>, A. Ajaz<sup>1</sup> and A. Korszun<sup>2</sup>

<sup>1</sup>East London NHS Foundation Trust, Department Of Medical Education, London, United Kingdom and <sup>2</sup>Queen Mary University of London, Wolfson Institute Of Population Health, London, United Kingdom

\*Corresponding author.

doi: 10.1192/j.eurpsy.2022.2190

**Introduction:** During the COVID-19 pandemic, telesimulation became particularly important to continue the education of medical students during disrupted clerkships while maintaining social distancing.

**Objectives:** To describe our experiences of adapting to telesimulation and evaluate this from student and faculty perspectives.

**Methods:** The intervention was evaluated using anonymous surveys consisting of statements rated on a five-point Likert scale from strongly disagree to strongly agree and open-ended questions asking students and facilitators what went well, what they would change and why, and for any other comments.

**Results:** Adaptations addressed the logistics of online delivery and the structure and content of scenarios. Logistical considerations included central organization of sessions to relieve pressures on clinicians. Pre-session case discussions were introduced to maximise time with simulated patients and give students space to socialise. Content was modified to ensure functionality online and reflect the context of the pandemic. A total of 278 students and 24 facilitators participated in the telesimulation sessions. 98.1% of students (N=109) rated the sessions as very good or good. Students benefited from practicing skills, especially clinical situations which they would rarely encounter as students, and receiving feedback. Facilitators (N=6) felt that students learnt both skills for online consultations and skills that can be transferred to face-to-face situations, but were ambivalent on whether students would benefit more from face-to-face sessions.

**Conclusions:** Telesimulation is a safe and effective option that offers additional opportunities for students to develop telemedicine skills. Going forward, telesimulation should complement face-to-face delivery to develop future clinicians who are proficient in both remote and face-to-face working.

**Disclosure:** No significant relationships.

**Keywords:** telesimulation; Covid-19; undergraduate medical education

### EPV1604

#### Reflections on the production and use of interviews as a learning tool in educational podcasts for medical undergraduates

S. James<sup>1,\*</sup>, T. Awolesi<sup>1</sup> and S. De Souza<sup>2</sup>

<sup>1</sup>University of Bristol, Medical School, Bristol, United Kingdom and <sup>2</sup>Somerset NHS Foundation Trust, Pyrland Ward, Wellsprings Hospital, Taunton, United Kingdom

\*Corresponding author.

doi: 10.1192/j.eurpsy.2022.2191

**Introduction:** The therapeutic interview is one of the cornerstones of psychiatric practice. When practitioners are skilled in the art of interviewing, patients are allowed to share their narratives and explore their emotions, while the clinician can diagnose and treat more effectively. Discussions with colleagues can be used to share knowledge and experience. As part of a student project undertaken in Summer 2021, two students were tasked with producing a series of educational podcasts to be used for psychiatric training. Both students chose to complete several interviews with professionals in psychiatry. In this study, they will reflect on the efficacy of