

sociodemographic and clinical data between the two genders. General Linear Modelling (specifically, repeated measures ANOVA) was performed to compare the effect of gender on the evolution of depressive symptoms (measured by BDI-II).

Results: Significant between-group differences were observed for the evolution of depressive symptoms after controlling for the intervention group and age. These results suggested that being a woman was significantly related to a worse evolution of depressive symptoms. This association implies a large effect size.

Conclusions: The COVID 19 pandemic has not only been able to predispose women to Depression to a greater extent, but it is also possible that it has negatively conditioned their response to antidepressant therapies compared to men. However, our data suggest the possibility that greater psychological support could help prevent this situation.

Disclosure of Interest: None Declared

EPP1076

Female infertility, Alexithymia and Stress

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doi: 10.1192/j.eurpsy.2023.1348

Introduction: In this research the Paris School (I.P.S.O.), by P. Marty, is chosen as the theoretical and clinical basis of Psychosomatics. We work with the degree of mentalization (good, bad and uncertain) -obtained through Marty's Psychosomatic Classification-, as a previous diagnosis and prognosis of 120 infertile women undergoing treatment at the Assisted Reproduction Unit (ARU) at Hospital Universitario 12 de Octubre in Madrid.

Objectives: a) To analyse the statistical coincidence between female infertility, stress and alexithymia syndrome. b) To verify the differences between psychosomatic disorders and other somatoform symptoms and syndromes (conversive and hypochondriac). c) To test the following hypothesis: subjects whose degree of mentalization is deficient, present high degree of alexithymia and stress.

Methods: 120 infertile women undergoing treatment with Assisted Reproduction Techniques were examined by means of psychodiagnostic tests.

Diagnostic tools: P. Mary's Psychosomatic Classification (P.C.) (semi-structured interview), as a means of diagnosing the degree of mentalization; T.A.S. (Toronto Alexithymia Scale); Battery of stress measurement questionnaires (H.A.D., PANAS. IRE, MCMQ).

The correlation of coincidence between the results of C.P. and the different Alexithymia and Stress questionnaires with the independent variable (success or failure of pregnancy in the selected subjects) has been studied, applying Spearman's Correlation Coefficient.

Results: With respect to what was obtained in the Psychosomatic Classification:

- T.A.S. questionnaire yields a coefficient of [-0.48]. Therefore, there is a negative correlation between the degree of mentalization and the presence of alexithymia; in other words, as the degree of mentalization increases, the degree of alexithymia decreases and vice versa;

- There is positive correlation [0.39] between the results of Mentalization (Psychosomatic Classification) and the degree of stress; therefore, the existence of stress does not prevent better mentalization.

Conclusions: The present research concludes: a) that people at risk for psychosomatic disorders have high scores on "alexithymia"; b) that patients at high risk for psychosomatic disorders do not necessarily suffer from "stress" situations; c) that there are many indicators in behavior and psychological functioning that differentiate psychosomatic disorders from conversive and hypochondriac disorders - both in their etiology and their development; d) there is a statistical correlation between female infertility and alexithymia; e) there is no statistical correlation between female infertility and stress.

Disclosure of Interest: None Declared

EPP1077

Quality of Life among University Students with Premenstrual Symptoms: The Role of Emotion Regulation

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doi: 10.1192/j.eurpsy.2023.1349

Introduction: Premenstrual dysphoric disorder (PMDD), a severe form of the premenstrual syndrome (PMS), negatively impacts women's quality of life, including physical and mental aspects. Difficulties in emotion regulation, more prevalent among women with PMDD, are also associated with poor quality of life.

Objectives: To determine whether the negative impact of premenstrual symptoms on quality of life is partially explained by emotional dysregulation.

Methods: A total of 112 women completed self-report questionnaires, including a demographic questionnaire, the Premenstrual Symptoms Screening Tool (PSST), Medical Outcomes Study Short Form-36 (SF-36), and the Difficulties in Emotion Regulation Scale (DERS). To test the mediation hypothesis, direct and indirect effects of premenstrual symptoms on quality of life were calculated.

Results: Quality of life was impaired in the PMS/PMDD group compared to controls. The PMS/PMDD group showed significantly greater emotion regulation difficulties as compared to the No/mild PMS group. Emotion regulation difficulties partially mediates the relationship between premenstrual symptoms and quality of life, for both SF-36 total score and mental subscale, but not for physical subscale.