

**Objectives:**

1. To assess the prevalence of self-esteem issues among adult patients ( $\geq 18$  years old) attending the HCPA Craniofacial Surgery Sector.
2. To examine potential contributing factors to self-esteem problems in this specific patient population.
3. To evaluate the impact of self-esteem on the mental health and psychosocial functioning of adult craniofacial surgery patients.
4. To propose recommendations for psychosocial support and intervention strategies tailored to the needs of adult patients in this context.

**Methods:** This cross-sectional study involved 132 adult patients who had undergone or were scheduled for craniofacial surgery at HCPA. Participants reported self-esteem issues in their talk with the hospital's physicians, and their medical records were reviewed to collect demographic and clinical data. Additionally, participants provided information about their mental health status and psychosocial functioning.

**Results:** Among the 39 adult patients included in the study, 37 (94.9%) reported experiencing self-esteem issues, such as lack of confidence or feeling unattractive. The most commonly reported contributing factors were visible facial differences, social interactions, and prior surgical experiences. Patients with lower self-esteem had a higher likelihood of reporting symptoms of depression and anxiety and reported lower overall psychosocial functioning compared to those with higher self-esteem.

**Conclusions:** This reveals a strikingly high prevalence of self-esteem issues among adult patients attending the Craniofacial Surgery Sector at HCPA. These findings underscore the importance of recognizing and addressing the psychological well-being of adult craniofacial surgery patients. Comprehensive psychosocial support, including counseling, peer support, and interventions to enhance self-esteem, should be integrated into the care of these patients. By addressing self-esteem concerns, healthcare providers can improve the mental health and overall quality of life of adult craniofacial surgery patients.

**Disclosure of Interest:** None Declared

**EPV0260**

### Prevalence of psychiatric and cognitive disorders in patients with Pierre-Robin sequence - a statistical analysis

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doi: 10.1192/j.eurpsy.2024.1007

**Introduction:** The Pierre-Robin sequence (PRS), characterized by micrognathia, glossoptosis, and cleft palate, has long been a subject of clinical interest. Recent research suggests a potential association between PRS and cognitive or psychiatric disorders. This study explores this intriguing connection, shedding light on

the complex interplay between craniofacial anomalies and mental health.

**Objectives:** This study aims to establish a comprehensive understanding of the relationship between Pierre-Robin Sequence and psychiatric disorders. Specifically, our objectives include: assessing prevalence, evaluating impact and informing clinical practice. This research aims to improve the holistic care and mental well-being of individuals with craniofacial malformations, contributing to a more comprehensive approach in the field of psychiatry.

**Methods:** This cross-sectional study was conducted at a prominent referral hospital named Hospital de Clínicas de Porto Alegre, an international reference in Pierre-Robin Sequence, during the month of August 2023.

**Participant Selection:** Patients with PRS. Inclusion criteria encompassed individuals of all ages and both genders.

**Data Collection:** Trained medical personnel conducted structured interviews with participants to gather demographic information, medical history, and details of their craniofacial conditions.

**Medical Records Review:** Medical records were reviewed to corroborate craniofacial diagnoses and identify any comorbid conditions.

**Statistical Analysis:** Data were analyzed using appropriate statistical techniques to assess the association between PRS and psychiatric disorders.

**Ethical Considerations:** The study adhered to all ethical guidelines, with informed consent obtained from participants or their legal guardians. Ethical approval was obtained from the hospital's Institutional Review Board.

**Data Handling:** Confidentiality and data security were ensured throughout the study, with all data anonymized to protect participant privacy.

**Results:** In our study, we assessed 28 different patients with Pierre-Robin Sequence, comprising 13 females and 15 males. The youngest patient was 2 months old, while the oldest was 22 years old. The mean age of the patients was 4.75 years, with a median of 3 years and a standard deviation of 5.36 years.

Among the patients, 6 exhibited psychiatric disorders, split between 4 males and 2 females. Their average age was 10 years, with a median of 9 years and a standard deviation of 4.2. The youngest patient with evidence of a psychiatric disorder was 5 years old.

**Conclusions:** This study underscores a concerning reality within the Pierre-Robin population, pointing to a high prevalence of psychiatric disorders. These findings highlight the urgent need for integrated care, emphasizing the importance of early psychiatric assessment and tailored interventions to enhance the overall well-being of individuals facing the challenges of PRS.

**Disclosure of Interest:** None Declared

**EPV0262**

### Prevalence of skin disorders among psychiatric inpatients

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doi: 10.1192/j.eurpsy.2024.1008

**Introduction:** The interface between dermatology and psychiatry is complex and of clinical importance. Skin disorders in psychiatric inpatients are common, serious and under diagnosed.

**Objectives:** The aim of our study was to assess the prevalence and profile of several skin diseases observed in psychiatric inpatients.

**Methods:** We conducted a cross-sectional study in the period from October 13, 2023 to October 20, 2023, among psychiatric male inpatients, hospitalized in psychiatry B department of the Hedi Chaker University Hospital (Sfax, Tunisia). We collected socio-demographic and clinical data using a pre-established form.

**Results:** Over a period of a week, 35 patients were included in our study. The mean age of patients was 39.97 years. Among them, 80% were single and 14.3% were married. Addictive behaviors were reported in 74.3% of cases. The level of hygiene was good in 74.3% of patients. The three most common psychiatric diagnoses were schizophrenia (31.4%), followed by bipolar disorder (28.6%) and schizoaffective disorder (25.7%). We recorded 13 cases of skin diseases (37.2% of patients). Dermatological lesions were dominated by traumatic origin in 14.3% of cases. They were of infectious origin in 11.4% of cases, immunoallergic in 8.6% and parasitic in 2.9%.

**Conclusions:** The prevalence of skin diseases is high in psychiatric inpatients, for whom proper skin care is necessary to improve their quality of life.

**Disclosure of Interest:** None Declared

## EPV0264

### Symptoms of anxiety and depression among osteoporotic women

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doi: 10.1192/j.eurpsy.2024.1009

**Introduction:** Osteoporosis (OP) prevalence is on the rise as a result of an ageing population and lifestyle factors such as inactivity. Previous research has reported OP in individuals with depressive symptoms. Furthermore, OP has been shown to be a risk factor for anxiety.

**Objectives:** In this study, we aimed to describe anxiety and depression symptoms among osteoporotic women in a university hospital in Tunisia.

**Methods:** A cross-sectional study was conducted between January and June 2023 in a university hospital in Tunisia. Women with postmenopausal OP in the rheumatology department were interviewed. A hospital anxiety and depression scale was used to describe anxiety and depression symptoms among patients. It consists of seven items for depression (HADS-D) and seven items for anxiety (HADS-A). For each component a score  $\leq 7$  indicated the absence of symptomatology.

**Results:** Seventy-two women diagnosed with post-menopausal OP participated in the study. The mean age was 72.5 ( $\pm 1.08$ ). The median duration of menopause was 23 years (IQR = [10.5-28.5]).

All patients were receiving bisphosphonates. Fifty-eight women (80.5%) were identified with depressive symptoms. The median depression score was 17.5 (IQR = [9-19]). Physical activity was significantly and inversely associated with the presence of depressive symptoms ( $r = -0.36$ ;  $p = 10^{-3}$ ). Those who were overweight or even obese had significantly more depressive symptoms than those who were not overweight (94%, 57%,  $p = 0.001$ ).

The median score of anxiety was 16 (IQR = [9-17]). Sixty-three patients (87.5%) were identified with anxiety symptoms. Physical activity was significantly and inversely associated with the presence of anxiety symptoms ( $r = -0.489$ ;  $p = 10^{-3}$ ). Women who had bone fractures were significantly more anxious than those without a history of bone fractures (100%, 63%,  $p < 10^{-3}$ ). Patients who were overweight were significantly more anxious than those with normal weight (96%, 57%,  $p < 10^{-3}$ ).

**Conclusions:** Physical activity and obesity were associated with depression and anxiety among osteoporotic patients. These data are consistent with previous findings. That's why, promoting physical activity and weight loss is essential to preventing mental disorders among osteoporotic women.

**Disclosure of Interest:** None Declared

## EPV0265

### Anxiety in patients with ankylosing spondylitis in southern-Tunisia: Level and associated factors

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doi: 10.1192/j.eurpsy.2024.1010

**Introduction:** Ankylosing spondylitis (AS) is the second most common rheumatic disease after rheumatoid arthritis. The significant functional impact of this chronic disease can affect patients' mental health.

**Objectives:** The aim of this study was to determine the prevalence of anxiety in subjects with AS in Southern-Tunisia and to identify its associated factors.

**Methods:** It was a retrospective study conducted in 2021 over a period of 5 years on patients with AS consulting the rheumatology department at the Hedi Chaker University Hospital in Sfax, Southern-Tunisia. The "Anxiety and Depression scale" was used to screen for anxiety. A score  $\geq 11$  defined confirmed anxiety symptoms.

**Results:** Of the 62 patients, 35 were male (56.5%), giving a male to female ratio of 1.3. Twenty-seven patients (43.5%) were aged between 35 and 50 years. The level of education was primary in 19 cases (30.6%) and university in 15 cases (24.2%). A family history of chronic disease was present in 32 cases (51.6%). Severe fatigue was noted among 27 patients (43.5%). Quality of life was poor in 39 patients (62.9%). The mean anxiety score was  $11.35 \pm 4.6$ . Thirty-four subjects (54.8%) had confirmed anxiety symptoms and 19 (30.5%) had borderline symptoms. Confirmed anxiety was significantly associated with the educational level ( $p = 0.03$ ) (illiterate: