

and CPAP treatment proved to be determining factors in anxiety and depressive disorders, hence the importance of detecting these disorders in order to improve patients' quality of life.

Disclosure of Interest: None Declared

EPV0078

Non-Adaptive Defense Mechanisms and Their Relationship to Psychosomatic Disorders among a Sample of University Students

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Introduction: In the university stage, the student is exposed to many psychological changes, pressures, and conflicts, which makes him resort to many non-consensual psychological defense mechanisms such as (repression, justification, projection, relapse, denial, delusional illness, reverse transference, day-dreaming), which causes an imbalance in the personality and its psychological functions. This may lead to cognitive and mental distortions and physiological imbalances, and the appearance of symptoms that cause psychosomatic disorders that are not due to organic physiological imbalances or bacterial diseases, but rather as a result of imbalances in the psychological functions of the ego, which increases the symptoms of headache, vomiting, poor digestion, irritable bowel syndrome, shortness of breath, rapid heartbeat, hormonal imbalance, facial redness, and others.

Objectives: 1. Identifying the degree of use of non-consensual psychological defense mechanisms among university students, and the differences in this according to the variable (gender and degree of academic achievement)

1. Revealing the correlation between the degree of use of non-consensual psychological defense mechanisms and the emergence of disturbed psychosomatic symptoms in the functions of (the respiratory system, the digestive system, the cardiac system, the muscular system, sleep disorders, and bodily disorders).

Methods: The correlational analysis approach was used to study the relationship between the variables of the study. The sample consisted of 300 male and female university students. A scale for psychological defense mechanisms was constructed, and a scale for psychosomatic disorders prepared by Diop (2011) was adopted, and its psychometric properties were verified.

Results: The responses in the degrees of non-consensual psychological defense mechanisms were varied, with a high degree in (justification, projection, repression, and delusional illness) and a moderate degree in (relapse, daydreaming, denial, and reverse transference). Differences appeared between males and females in favor of males, while differences in academic grades were in favor of the lowest grade. The results also showed a statistically significant correlation between psychological defense mechanisms and the appearance of psychosomatic symptoms, as it was high in disorders (respiratory system, cardiac system, muscular system, sleep disorders), and moderate in (emotional disorders and somatic disorders).

Conclusions: There is a positive correlation between the degrees of use of non-consensual psychological defense mechanisms and the

emergence of psychosomatic disorders, in the functions of several bodily systems and behavioral and emotional disorders.

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EPV0080

Interrelations of phantom ringing related anxiety and personal self-esteem in undergraduate university students

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Introduction: Manifestations of phantom ringing syndrome are widely seen in healthy population. Are there any interrelations between this phenomenon and personal psychological characteristics that are connected with the level of their mental health?

Objectives: To determine the specificity of interrelations of phantom ringing syndrome related anxiety and personal self-esteem in university students

Methods: The anonymous survey covered 546 undergraduate university students. The questions were centered on the students' patterns of their personal smartphone use.

Results: The research showed that manifestations of phantom ringing syndrome is available in 189 students, or in every third student (34.6%), who use mobile phones. It is equally represented in males (49.7%) and females (50.2). Clinically, it is characterized by a higher level of anxiety, which reliably correlates ($p < 0.01$) with the level of stress ($r = .17$), level of nervousness caused by absence of a mobile phone ($r = .18$), the frequency of headache ($r = .15$), the frequency of medication consumption related to chronic somatic disease ($r = .15$). We also established valid negative interrelations between the level of phantom ringing syndrome related anxiety and the personal self-esteem based on the parameters of religious belief ($r = -.15$), personal attractiveness ($r = -.16$), mind ($r = -.17$), happiness ($r = -.24$), liveliness ($r = -.25$) and well-being ($r = -.15$). We have not found any proof of valid interrelations with self-assessment of health.

Conclusions: The received results prove that phantom ringing syndrome related anxiety is connected with the personal self-esteem, the level of the perceived stress and some other clinical manifestations

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EPV0081

Pimozide as an effective treatment for obsessive symptoms related to physical discomfort in the context of somatoform symptomatology.

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