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Aims. One of the top causes of death and injury among adolescents and young adults is suicidal behaviour. Indeed, suicide is the second leading cause of death among individuals aged between 15 and 24 years worldwide. Studies on the prevalence of suicide among university students in the UAE are scarce. Importantly, the extent of awareness and experience of suicidality among this group is still unknown. We aimed to ascertain the knowledge and attitudes towards suicidal warning signs and symptoms amongst university students in the UAE.

Methods. An online self-administered questionnaire platform was used to collect data from UAE university students in a quantitative cross-sectional study. In addition to demographics, experience regarding suicidal thoughts and behaviours, efficacy expectations, and outcome expectations and values were evaluated. Data were analysed using SPSS, setting a p-value of <0.05 as statistically significant.

Results. A total of 392 participants completed the questionnaire, 233 (59.4%) were males and 159 (40.6%) were females. Based on the knowledge scale, only 35.3% of total participants were identified as knowledgeable of the warning signs of suicide. Expectedly, out of the knowledgeable group, a vast majority of 83.3% were medical students. When they were asked about what they would do if a friend told them that they are thinking about ending their life, many of the students chose to talk to their friends without getting anyone else's help. There was no statistically significant correlation between being educated regarding suicide and being knowledgeable of suicidal signs and symptoms ($P = 0.1$). Surprisingly, the degree course students enrolled in was not found to play a significant role in their level of confidence regarding suicidal signs and symptoms.

Conclusion. To our knowledge this is the first study to investigate awareness and attitudes about suicidal thoughts and behaviours among university students in the UAE. Knowledge regarding suicidal signs and symptoms among university students in the UAE is notably low. According to the results, self-reported education did not play a major role in appropriately managing suicidal signs and symptoms. The nature of the education provided to students needs to be further investigated to explore the gaps in the knowledge provided.

Abstracts were reviewed by the RCPsych Academic Faculty rather than by the standard *BJPsych Open* peer review process and should not be quoted as peer-reviewed by *BJPsych Open* in any subsequent publication.

Exploring the Relationship Between the Menstrual Cycle and Women's Mental Health in a Female Inpatient Ward

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Aims. To explore the relationship between the menstrual cycle and mental health-related symptoms in women admitted as psychiatric inpatients. To explore the acceptability and feasibility of enquiry. Background: Despite the increasing global burden of mental disorder among women* of reproductive age, there has

been little focus in research or clinical practice on the role of reproductive hormones in the pathogenesis, maintenance and treatment of mental disorder in women. Yet a significant proportion of women are vulnerable to fluctuations in sex hormones (for example in the premenstrual or perimenopausal periods).

Methods.

- 21 patients were asked a series of questions about their menstrual cycle by ward doctors, during their inpatient admission. Descriptive statistics were generated. Data from free text questions were analysed using thematic analysis.
- A focus group was facilitated by the ward occupational therapist on 1st November 2021, involving seven patients.

Results. The project ran between November 2021 and February 2022. Mean age of respondents was 38 years and 57% ($n = 12$) were of Black ethnicity. 76% ($n = 16$) reported having a period in the last 12 months. Of these, 10 women felt their mental health changed throughout the month in relation to their menstrual cycle. Themes elicited from free text questions related to symptoms experienced during the pre-menstrual phase and included increased suicidality, anger, low mood and unusual experiences. Of the seven women who had not had a period in the last 12 months, over half ($n = 4$) reported menopausal symptoms. During the focus group those women who had gone through the menopause noted they had limited knowledge about it and how it may affect their mental health.

With regards to feasibility of enquiry, the focus group indicated that women would like to discuss their menstrual cycle, how it can affect their mood and additional support available. However, they would prefer this took place in a one-to-one setting outside of ward round, ideally with a female doctor.

Conclusion. A number of female psychiatric inpatients likely experience an increase in mental health-related symptoms pre-menstrually. Enquiry about menstruation is likely to be feasible in the inpatient setting, given it is done sensitively. Such enquiry could provide opportunities to discuss areas of concern to the patient and discuss specific issues such as menopause and pre-menstrual dysphoric disorder. It could also provide data for future research and guide the development of clinical practices that recognise the relationship between the menstrual cycle and women's mental health.

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An Analysis of Factors Associated With Readmission Within Ninety Days From a Community Mental Health Rehabilitation Team

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Aims. Frequent readmissions present a challenge to both community and inpatient mental health services and are frequently used as a quality indicator. Service users who are readmitted also tend to have a poorer prognosis and can be characterised as 'revolving door' patients. Determining modifiable factors that affect rates of readmission may allow mental health services to target interventions such as to improve outcomes and service users' experiences

Methods. The caseload of an inner-city NHS community rehabilitation team was examined for psychiatric admissions