

Conclusions: Suicide accounted for 1.3% of global mortality, ranking as the 17th most common cause of death in 2019, according to data from the World Health Organization (WHO). This trend emphasizes the urgent need for continuous efforts at all levels to address and mitigate this rapidly growing issue.

Disclosure of Interest: None Declared

O0031

Investigation of peripheral inflammatory biomarkers in association with suicide risk in major depression

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doi: 10.1192/j.eurpsy.2024.1651

Introduction: Suicide is the most severe consequence of major depressive disorder (MDD). The most novel researches assume the role of immunological dysregulation in the background – several studies have reported alterations of inflammatory cells related to both MDD and suicidal behaviour (SB).

Objectives: Changes in the number of certain immune cells and their ratios have been proposed as potential biomarkers of suicide risk (SR). The aim of our research was to investigate alterations of these values related not only to MDD as an assumed inflammatory state, but also to an increased risk of SB.

Methods: In our retrospective cohort study carried out between January 2015 and January 2020, we investigated laboratory parameters of psychiatric patients diagnosed with MDD ($n=101$). Individuals with recent (≤ 48 hours prior) suicide attempt (SA) ($n=22$) and with past SA (>48 hours prior) ($n=19$) represented the high SR group. MDD patients with no history of SA ($n=60$) composed the intermediate SR group. We compared the number of neutrophil granulocytes, monocytes, lymphocytes, platelets, leukocytes, neutrophil-to-lymphocyte (NLR), monocyte-to-lymphocyte (MLR), platelet-to-lymphocyte ratio (PLR), red blood cell distribution width (RDW) and erythrocyte sedimentation rate (ESR). Furthermore, we evaluated alterations of these parameters related to antidepressant (AD) treatment, which has been proved to have anti-inflammatory effects. Statistical analyses were carried out using GraphPad 9.5.0 and MedCalc 16.8 programmes.

Results: We found a significant increase in neutrophil granulocyte count ($p=0.016$), NLR ($p=0.031$, Fig. 1), monocyte count ($p\leq 0.0001$), MLR ($p=0.005$, Fig. 2), leukocyte count ($p=0.048$) and ESR ($p=0.037$) in patients with recent SA compared to patients with no history of SA. Moreover, there was a significant elevation in monocyte count ($p\leq 0.0001$), MLR ($p=0.020$, Fig. 3), ESR ($p=0.041$) and RDW ($p=0.037$) in patients with high SR compared to patients with intermediate SR. AD treatment resulted in a significant decrease in neutrophil granulocyte count ($p=0.0163$) and NLR ($p=0.016$), however, it did not affect the rest of the parameters.

Image:

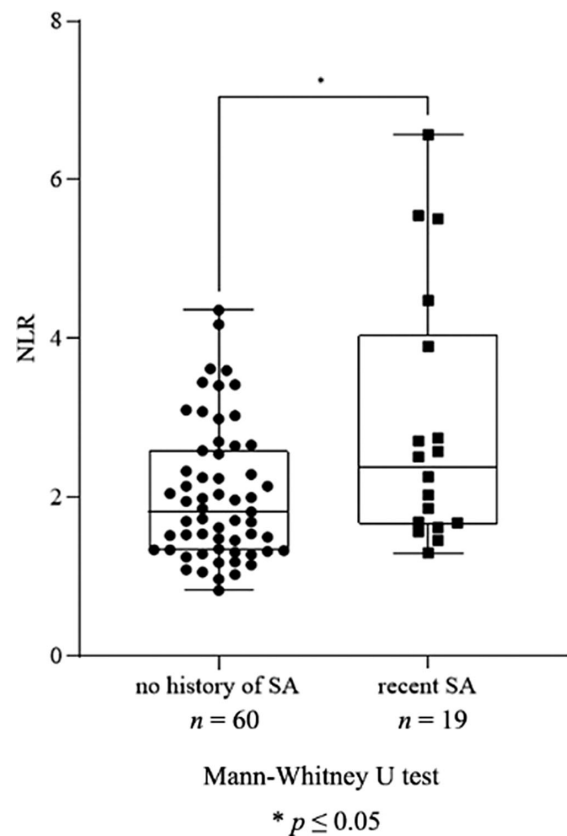


Image 2:

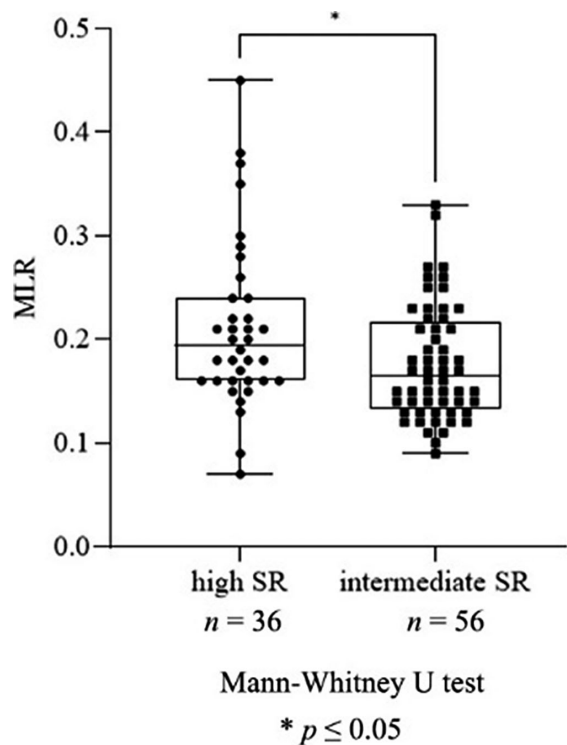
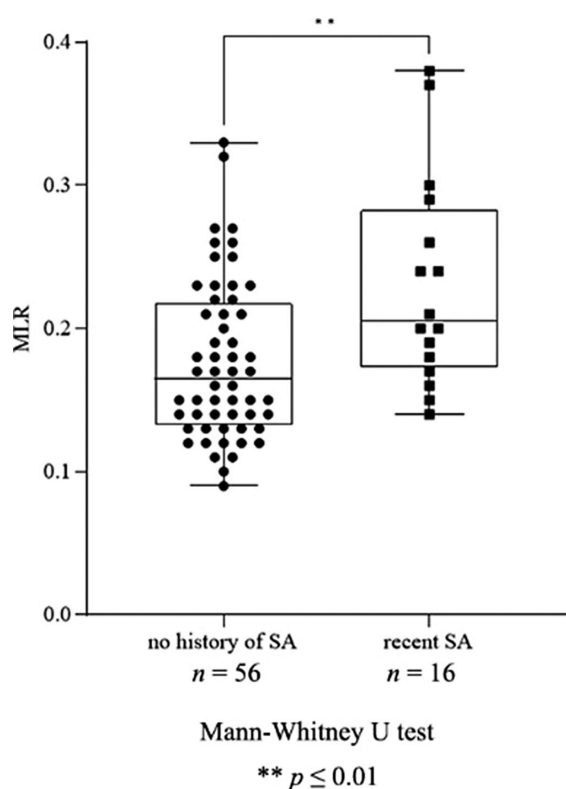


Image 3:



Conclusions: Assuming immunological mechanisms in the background of MDD and SB, our findings support the role of NLR as a biomarker of acute SR, though its alterations may be masked by AD therapy in the long term. However, MLR – remaining unaffected by AD treatment – may be a possible indicator of both acute and long term suicidal vulnerability. In order to further specify the diagnostic value of these parameters, future prospective research is needed. The study was supported by the FIKP-IV and the TNIL projects.

Disclosure of Interest: None Declared

Training in Psychiatry

EPV1077

Supervision an essential tool in medical (and psychiatric) training

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doi: 10.1192/j.eurpsy.2024.1652

Introduction: Supervision is an essential tool in medical training and especially in psychiatry and psychotherapy. It encompasses two distinct aspects namely: coaching in the workplace aimed at

developing competences (pyramid of Miller) and on the other side a safe place to reflect on one's personal development as a professional. This mentoring should be distinguished from the personal training psychotherapy. The mentoring supervisor will take the doctor's pledge as a starting point of professional development. But will also encourage the resident to become aware of elements of transference and counter transference in his/her clinical work, helping to foster empathy "maximal understanding with respect for professional distance. This, not only for the benefit of the patient and his/her security, but also in order to take care of one's own health and developing a sound balance between work and private life.

Too often supervision is taken for granted once the resident has become a consultant. Along with examples of the techniques and the pitfalls of supervision, the presenters will plea for training and intervision as part of the development of the supervisor!

Objectives: Raise awareness for the competences needed to become a valuable supervisor and the place supervision in its two aspects (coaching and place of reflection) should take in the training of medical doctors and especially psychiatrists

Methods:

- an inventory of the place of supervision in training in psychiatry throughout Europe
- looking into competences needed in order to develop a sound professional attitude
- looking into the competencies needed to become a valuable supervisor

Results:

- supervision is differently defined and given in training in psychiatry throughout Europe
- the competences needed in order to develop a sound professional attitude are defined in the Doctor's Pledge (World Medical Association 2017) but should be refined according to the specialty with special attention to aspects of psychiatry alien to other specialities
- along with Teaching the Teachers - special trainings are available to become a supervisor

Conclusions: Supervision is an essential tool in medical/psychiatric training, but it needs to be taken seriously in terms of developing the competences needed but also maintaining them in intervision with the colleagues of the training staff

Disclosure of Interest: None Declared

EPV1078

Promoting well-being: Investigating self-efficacy and academic burnout among trainee teachers

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doi: 10.1192/j.eurpsy.2024.1653