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Introduction: Alagoas is one of the poorest states of Brazil and its HDI is the country's worst.

Objectives: Present the epidemiological profile of suicides that occurred in the State of Alagoas from 2008 to 2018.

Methods: This research is epidemiological, descriptive and transversal. In this sense, data from the Universal Health System Informatics Department (DATASUS) were used to analyze the age range, marital status, race, sex, education and cause of death of the suicide victims.

Results: 1245 people committed suicide in Alagoas in the period of 10 years, they were 951 men (76%) and 294 women (24%). The main cause of death was self-harm caused by hanging, strangulation and suffocation (ICD X-70), occurring in approximately 67% of cases (836 people), followed by self-poisoning by drugs and medication (ICD X-64) 140 people, and pesticides (CID X-68) 92 people. The auto injuries caused by firearms (ICD X-72 to X-74) totalled 45 victims, while the self-inflicted injuries intentionally caused by precipitation from a high place (ICD X-80) totalled 38 victims. Most of those who took their lives were single (57%), brown (88%), had between 15 and 39 years old (55%) and did not have their education level informed (75%).

Conclusions: Thus, the present study demonstrated that there is a compromise of important statistical data on education level and there is the inexistence of data on family income and sexual orientation, which may help to understand the phenomenon of suicide in Alagoas. Despite all this, it was possible to identify a group of risk for suicide in the State: brown, single and young men.

Disclosure: No significant relationships.

Keywords: Suicide; epidemiology; Brazil; *causa mortis*

EPV0707

The suicidal survivor: Considerations for treatment in psychodynamic psychotherapy

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Introduction: Suicide is a phenomenon that is increasing in prevalence. Exposure to suicide by a loved one can be experienced as a traumatic event, capable of precipitating or aggravating preexisting psychiatric conditions. As much as we are clinically aware of gravity situation experienced by suicide survivors, there is a marked lack of studies on psychotherapeutic interventions in this population group.

Objectives: The present work aims to review the literature on the psychodynamic treatment of suicide survivors, considering their theoretical and technical aspects.

Methods: Narrative review of psychiatric and psychoanalytic literature.

Results: The initial reaction described on becoming aware of the suicide of someone close to you is of disbelief, shock and helplessness. This is followed by ambivalent feelings of hate and guilt, shame and hopelessness. Sometimes, a chronic depressive state expressed by the survivor's guilt can emerge. The mourning work will initially encounter resistance to face the loss of the object, through mechanisms such as denial, repression and psychotic fantasies. The lost suicide has a traumatic impact, modifying relational patterns and it is commonly associated with important isolation. The survivor will be able to transfer via fear the death of the therapist and even fantasize that he will also kill himself.

Conclusions: Psychodynamic psychotherapy with suicide survivors finds theoretical and practical foundations in the literature, mainly through discussions of reports clinical and theoretical reviews on the topic. Through transfer and therapeutic alliance, new patterns of object relation can be sketched, in a context of mourning so often complicated by shutdown pressures and loneliness.

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Keywords: Suicide; Survivor; psychotherapy; trauma

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Suicide postvention in psychiatry

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Introduction: During their career and sometimes during their training psychiatrists have to deal with the suicide of patients and have also to help other colleagues and families to cope with the situation. Suicide postvention should be integrated in psychiatric training and better implemented in both psychiatric and community contexts.

Objectives: To discuss the concept of suicide postvention in Psychiatry. To discuss the importance of addressing suicide postvention in psychiatric settings including during specialized training of Psychiatry residents.

Methods: MEDLINE and PubMed databases searches for peer-reviewed studies, published in the last ten years, using combinations of the key-words suicide postvention and psychiatry. Selection of the relevant studies according to the study aims.

Results: The literature search retrieved a total of 44 papers. All the articles that didn't refer to the studied topic were excluded. Relevant articles discussing suicide postvention were selected, comprising a total of 22 articles. The reviewed papers discuss different contexts and strategies of suicide postvention that will be explored and critically discussed.

Conclusions: Addressing the topic of suicide postvention and implementing support programs and training in this field is crucial to psychiatry trainees, psychiatrists and other mental health professionals that integrate multidisciplinary teams, patients and their families and also to the community as a whole. Future research in this field can help to improve suicide postvention across different settings.

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Keywords: Suicide postvention; psychiatry