Conclusions: INQ-15-I provides a valid measure of the interpersonal needs among Italian university students by indirectly investigating suicidal risk factors. It also suggest specific clinical intervention areas in suicide prevention. Thus it may be included in suicide risk assessment protocols in Italy.

Keywords: Thwarted belongingness; Suicide; Interpersonal-psychological theory; Perceived burdensomeness

EPP1403

Suicidal behaviour in huntington disease

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Introduction: Huntington Disease (HD) is a genetic, progressive neurodegenerative disorder. Its clinical features include motor dysfunction, cognitive impairments, and psychiatric symptoms. The association between HD and suicide is well documented, and the risk of suicide in HD is higher than in patients with other neurological diseases.

Objectives: We aim to review the literature regarding suicidal behaviour in HD.

Methods: We performed an updated review in the PubMed database using the terms “suicide”, “suicidal behaviour” and “Huntington Disease”. The included articles were selected by title and abstract.

Results: The most relevant risk factors associated with suicidality in HD are depression, anxiety, and aggression, so the presence of psychiatric diagnoses should be closely monitored. No consistent results have been found regarding gender. Evidence for periods of elevated risk of suicidal behaviour in HD is mixed and the data on specific pharmacological interventions for alleviating suicidal ideation in HD is scarce.

Conclusions: Patients with HD are at a high risk for suicide. This risk is further increased when a comorbid psychiatric disorder is present. It is important for the practicing psychiatrist to be aware of this association to correctly manage patients with HD, thus helping prevent suicidal behaviour.

Keywords: Huntington Disease; Suicide

EPP1404

Factors for suicide attempt recurrence among patients with borderline personality disorder

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Introduction: The prevalence of borderline personality disorder (BPD) is significant, ranging from 0.5% to 5.9% in the general population. This personality disorder is associated with high rates of suicide attempt and for suicide attempt recurrence.

Objectives: Review recent studies of predictors of suicide attempt and for suicide attempt recurrence in patients with borderline personality disorder.

Methods: This is a literature review via Medline and Sciences Direct. The database was searched using the combination of the keywords “borderline” with “suicide”, “borderline personality disorder” with “suicide”, “borderline personality disorder” with “suicide attempts” “borderline personality disorder” with “suicide recurrence”.

Results: Recently it has been shown that BPD has a greater correlation with suicidal behavior than that of characterized depressive disorders. Several studies have shown that suicidal behavior in patients with BPD was associated with the coexistence of antisocial personality disorder, depression, hostility, impulsivity, a high number of suicide attempts and a first suicide attempt at a young age. Recently it has been established that the predictors of suicidal recidivism are the high number of suicide attempts, the female sex and single life status.

Conclusions: Special attention should be paid to predictive factors for suicide attempt and for suicide attempt recurrence in the clinical evaluation of patients with borderline personality disorder, especially in suicidal crisis.

Keywords: Borderline personality disorder; Suicide; prevalence; predictive factors

EPP1405

The role of emotion dysregulation in the relationship between narcissism and suicide

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Introduction: Suicide attempts and suicidal ideation are peculiar aspects of several cluster b disorders, including Narcissistic Personality Disorder. Similarly, difficulty in regulating negative affects can play a role in the relationship between narcissist features and suicidal ideation. To date, it is still unclear which facet of narcissism is more related to the desire to die and which other factors are involved in this relationship.

Objectives: To offer preliminary empirical evidences concerning the relationship between narcissism, emotion regulation and suicide ideation.

Methods: We administered Pathological Narcissism Inventory (PNI), Difficulties in Emotion Regulation Scale (DERS) and Beck Scale for Suicidal Ideation (BSI) to a sample of individuals with Suicide ideation (n= 68) and a sample of community participants (n=140).

Results: Controlling for age and gender, we found that BSI scores correlated significantly with the vulnerable dimension of narcissism, but not with the grandiose one, and with all DERS dimensions. Nevertheless, emotion dysregulation moderates the relationship between vulnerable narcissism and suicidal ideation.

Conclusions: Suicide ideation seems to be deeply connected with the vulnerable dimension of pathological narcissism and the relationship between the constructs is partially mediated by emotion dysregulation. Future directions and clinical implications are discussed.

Keywords: emotion dysregulation; Suicide ideation; narcissistic vulnerability; Narcissism

EPP1406

Suicide in narcissism: Can shame-proneness make a difference?

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Introduction: Cluster B personality disorders are characterized by a higher prevalence of suicidal ideation and behavior than others, and Narcissistic Personality Disorder is no different. Very intense feelings of shame, intolerable for the individual, are often found in patients with Narcissistic Personality Disorder and may have a role in suicidal behavior.

Objectives: To offer preliminary empirical evidences concerning the relationship between narcissism, shame and suicide ideation.

Methods: We administered Pathological Narcissism Inventory (PNI), Test of Self Conscious Affects (TOSCA) and Beck Scale for Suicide Ideation (BSI) to a sample of individuals with Suicide ideation (n= 65) and a sample of community participants (n=65).

Results: Controlling for age and gender, in the merged sample we found that BSI scores correlated significantly with the vulnerable dimension of narcissism and with TOSCA Interpersonal Shame subscale. In the clinical sample, Interpersonal shame partially mediates the relationship between vulnerable narcissism and suicidal ideation.

Conclusions: Shame seems to play a key role in the relationship between the vulnerable facet of narcissism and suicidal ideation, although the profound mechanism by which it works remains to be understood. Future directions and clinical implications are discussed.

Keywords: Suicide; Suicide ideation; shame-proneness; Narcissism

EPP1409

Addictive behavior and suicidality in patients followed by the department of psychiatry in the region of southern tunisia.

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Introduction: Addictive behaviors and suicide have important risks that need to be explored for any patient followed at the department of psychiatry, possibly endangering his vital and psychosocial prognosis.

Objectives: Our study aims to identify the link between addictive behavior and suicidal behavior in patients followed at the psychiatry department at the regional hospital of Gabes.

Methods: We conducted a cross-sectional, descriptive and analytical study carried out on a clinical population who consult in the psychiatry department in the Gabes's regional hospital during the period from January 1st, 2020 to September 30, 2020. Sociodemographic and clinical data of the patients as well as their personal and family history were assessed. The evaluation of psychopathological disorders was carried out according to the diagnostic criteria of DSM-5. Suicide Behaviors Questionnaire (SBQ) was used for suicide risk assessment. Fagerstrom questionnaire in its validated French version was used to assess the of nicotine dependence. The exploration of childhood physical and emotional trauma was carried out by the Childhood Trauma Questionnaire (CTQ) scale. Data were analysed using the software SPSS.

Results: 100patients were included. The mean age was 45.5years. TableI: Breakdown of addictive behavior and suicide attempts by gender. TableII: Common vulnerability factors between addictive behavior and suicidality

	Tobacco (cigarette, hookah, chewing tobacco)		Alcohol		Other psychoactive substances		Addictive behavior		History of suicide attempts	
	N	%	N	%	N	%	N	%	N	%
Male	43/60	71 %	7/60	11,6 %	8/60	13,3 %	44/60	73,33 %	12/60	20 %
Female	4/40	10 %	1/40	02,5 %	6/40	15 %	10/40	25 %	8/40	20 %
Total	47/100	47 %	8/100	8 %	14/100	14 %	54/100	54 %	20/100	20 %

Table I: Breakdown of addictive behavior and suicide attempts by gender

	Addiction	Suicidality
Urban place of residence	68 %	75 %
Factors of socio-professional disintegration		
Low educational level	87 %	75 %
Irregular or absent professional activity	81 %	85 %
Psycho-traumatic factors during childhood		
Exposure to physical neglect in childhood	57 %	85 %
Exposure to emotional neglect in childhood	64 %	85 %
Exposure to emotional abuse in childhood	57 %	85 %
Exposure to physical abuse during childhood	40 % (20% in non-drug addicts)	60 %
Psychiatric factors		
Anxiety-depressive disorders	51 %	60 %

Table II: Common vulnerability factors between addictive behavior and suicidality