### **EPP078**3

# Determinants of postpartum post-traumatic stress disorder

R. Ben Soussia  $^{1\ast}$ , F. Nour $^{2}$ , W. Bouali $^{1}$ , I. BelHAdj $^{2}$ , H. Bouchahda  $^{3}$  and L. Zarrouk $^{4}$ 

<sup>1</sup>psychiatry department, Tahar Sfar Hospital Mahdia; <sup>2</sup>Tahar Sfar Mahdia Hospital; <sup>3</sup>Tahar Sfar Hospital Mahdia and <sup>4</sup>Psychiatry Department, Tahar Sfar Hospital-Mahdia, Mahdia, Tunisia \*Corresponding author. doi: 10.1192/j.eurpsy.2023.1069

doi: 10.1192/j.eurpsy.2023.1069

**Introduction:** Post-traumatic stress disorder, following stress of a particular intensity, is often related to the perception of childbirth as a traumatic event requiring the optimization of follow-up and the interest of early detection.

**Objectives:** To determine the factors associated with post-traumatic stress disorder related to childbirth.

**Methods:** This is a longitudinal prospective analytical study carried out in the obstetrics gynecology department of the Tahar Sfar Mahdia hospital. The study population was women who gave birth during the study period from March 15, 2020 to September 15, 2020. We used a pre-established questionnaire including sociodemographic and clinical characteristics as well as a psychometric part containing the psychiatric scale for screening for posttraumatic stress disorder.

**Results:** Our sample included 120 women. The average age was 28.2±5.3.Five participants (4.2%) had a psychiatric history .

Thirty-five patients (29.1%) had a pathological obstetric history. However, fifteen patients (12.5%) were hospitalized during their pregnancies. Psychometric assessment revealed a prevalence of PTSD at 5.8% with PTSD symptomatology in 18.4% of women.

Twenty-two patients (18.3%) described the childbirth as painful and traumatic.

The frequency of PTSD was higher in women with a history of abortion (6.9%)

Postpartum PTSD was statistically associated with a low level of education (p=0.02), postpartum complications (p=0.05) and sex of the newborn (p=0.01)

**Conclusions:** The detection of factors associated with postpartum posttraumatic stress disorder seems to be essential for comprehensive and multidisciplinary management of women at risk.

Disclosure of Interest: None Declared

#### **EPP0784**

## Long-term Neurodevelopment outcomes to Prenatal Antipsychotic Medication Exposure: Systemic Review

#### T. González Campos

Psychiatry, University Hospital "Dr.José E. González" Universidad Autónoma de Nuevo León, Monterrey, Mexico doi: 10.1192/j.eurpsy.2023.1070

**Introduction:** Peak incidence for many psychiatric disorders occurs in reproductive years. We don't have FDA-approved drugs

or clinical guidelines. The main cause of pharmacological suspension in pregnancy is the lack of knowledge of their effects on the product. Gathering information on this regard becomes crucial so we can avoid relapses or exacerbation

**Objectives:** Describe neurodevelopmental effects in children  $\geq$  6 months exposed to antipsychotics prenatally.

**Methods:** PROSPERO-CRD42020170314. Using MeSH terms in 5 databases, without language and time restriction, obtaining n=3932. After review and exclusion n=24 were obtained for qualitative review. (Figure 1).

**Results:** Of 20 case reports 4 had more ambivalence results (**Table 1**). In the cohort studies, exposure may cause short-term delay at 6 months but no significant difference at 12 months (**Table 2**).

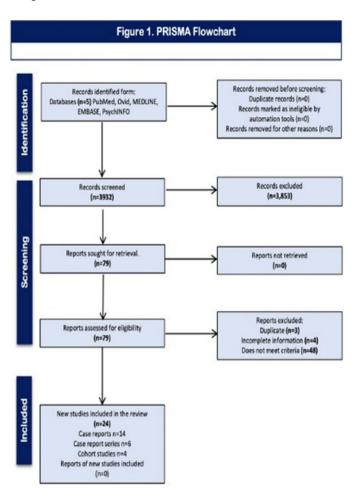
Та	b	le	2

Study	N	Antipsychotic	Months	Conclusion using clinical evaluation
Imaz et al. Front. Pharmacol.2018; 9:264	1	Risperdal Clozapine	72	Abnormal memory, attention/executive, hyperactivity
1		Clozapine	32	Normal
2		Clozapine	18	Abnormal
		Normal		Burt et al. Am J Psychiatry 2010; 167:892-897
1		Olanzapine	12,18, 22,29	18 months Abnormal motor 22 months normal 29 months normal
Kirchheiner et al. Pharmacopsych 2000; 33:78-80	1	Olanzapine	7,11	7 months Abnormal motor 11 months Normal
Mendhekar et al. J Neuropsychiatry Clin Neurosci 2007; 19:2	1	Clozapine	6	5 years Abnormal language

#### Table 3

				Conclusion using clinimetry
Study	N	Antipsychotic	Months	and clinical evaluation
Shao et al. Plos ONE, 2015; 10(4),1-9	63	Clozapine Risperidone Olanzapine Quetiapine	6,12	BSID-III 6 months Adaptive behavior score lower in clozapine group 12 months No difference
Johnson et al. Arch Gen Psychiatry2012; 69(8), 787-794	22	Haloperidol SGA*	6	INFANIB Lower scores with SGA then Haloperidol
Peng et al. Psychopharmacology 2013; 228(4), 577-584	76	Clozapine Risperidone Sulpiride Olanzapine Quetiapine	6,12	BSID-III 6 months Lower socio-emotional and adaptive behavior scores 12 months No difference
Petersen et al. BMJ 2016; 5(6), 1-9	290	FGA+SGA**	6	More neurodevelopmental disorder that those who didn't take antipsychotics.

Image:



**Conclusions:** Most are case reports, hence the importance of collecting this information, not ignoring it due to lack of methodological rigor. The intent is not to conclude that prenatal exposure to antipsychotics doesn't have long-term neurodevelopmental effects, rather documenting the available evidence contributing to an informed clinical decision.

Disclosure of Interest: None Declared

#### **EPP0786**

## Social representation of violence against women in psychology students at a university in the Colombian Caribbean

Z. J. Miranda- Sánchez\*, D. I. Sánchez- Pabón and K. M. Múnera-Luque

Psychology, Universidad Cooperativa de Colombia, Santa Marta, Colombia

\*Corresponding author. doi: 10.1192/j.eurpsy.2023.1071

**Introduction:** Violence against women is a violation of human rights and is part of one of the sustainable development goals. Thus, it is very important to be able to guarantee healthcare spaces from a

differential approach, in which they will be developed that promote equality and will help to prevent violence. Therefore, it is necessary to analyse the social representation that future professionals will have in health, and that can affect the approach given to this phenomenon. **Objectives:** To analyse the social representations of violence against women in psychology students at a university in the Colombian Caribbean.

**Methods:** The study was qualitative, exploratory and for convenience, with the application by web platform. The sample consisted of 110 psychology students from a university in the Colombian Caribbean, aged between 18 and 32 years (M=21; SD=3). The technique of free association of words and the application of semi-structured interviews were produced to identify the central and peripheral nucleus of social representation. For data analysis, the Atlas.ti version 22 software was obtained.

**Results:** It was found that the social representation of violence against women, in its strongest association, deals with the types of physical violence, highlighting among these physical beatings, rapes, assaults and femicides. Likewise, the effects that this phenomenon generates on the mental health of the victims and its relationship with stereotypes about gender roles, in turn, the presence of problems in the judicial system, which end up causing many cases to go unpunished or re-victimize women.

**Conclusions:** Violence against women constitutes a health problem, having professionals in this area who can understand the psychological impact, generates advantages in the development of strategies aimed at guaranteeing better care, which contributes not only to prevent this phenomenon but also to avoiding revictimization from mental health services.

Disclosure of Interest: None Declared

## **Bipolar Disorders 04**

## **EPP0787**

## Predictors of adherence to electronic self-monitoring in patients with bipolar disorder: a contactless study using Growth Mixture Models

A. Ortiz<sup>1\*</sup>, C. Park<sup>2</sup>, C. Gonzalez-Torres<sup>2</sup>, M. Alda<sup>3</sup>, D. Blumberger<sup>1</sup>, I. Husain<sup>1</sup>, M. Sanches<sup>2</sup> and B. H. Mulsant<sup>1</sup> <sup>1</sup>Department of Psychiatry, University of Toronto; <sup>2</sup>CAMH, Toronto and <sup>3</sup>Dalhousie University, Halifax, Canada \*Corresponding author. doi: 10.1192/j.eurpsy.2023.1072

**Introduction:** Several studies have reported on the feasibility and impact of e-monitoring using computers, or smartphones, in patients with mental disorders, including Bipolar Disorder (BD). Despite some promising early results, concerns have been raised about the motivation and ability of patients with BD to adhere to e-monitoring, in particular when they are depressed or manic. While studies on e-monitoring have examined the role of demographic factors, such as age, gender, or socioeconomic status and use of health apps, to our knowledge, no study has examined clinical characteristics that might impact adherence with e-monitoring of patients with BD. **Objectives:** We analyzed adherence to e-monitoring in patients with BD who participated in an ongoing e-monitoring study and evaluated whether demographic and clinical factors would predict adherence.