

**Introduction:** Spina Bifida (SB) is a congenital disease that can cause multi-system dysfunction and psychiatric symptoms. It is stated that the emotional and physical burden of the caregivers leads to increased levels of anxiety and depression.

**Objectives:** According to Gargiulo's stage model, it is composed of three stages. In the first phase, parents experience shock, denial, and depression. During the secondary phase, ambivalence, anger, and guilt are prominent, followed by the tertiary phase in which bargaining, acceptance, and adjustment are observed. Adjustment is the process of reorganization and realignment of the family needs and objectives and varies depending on the character of the family members.

**Methods:** Beck Depression Inventory (BDI), Beck Anxiety Inventory (BAI), Beck Hopelessness Scale (BHS) were used in this research. 66 volunteering parents were included, 34 of them having a child with SB and 32 of them having a healthy (non-SB) child.

**Results:** Depression, anxiety, and hopelessness scores were significantly higher in the SB group than the non-SB group. There is a significant positive correlation between education and income levels.

**Conclusions:** It is determined that the majority of the SB group did not have any support. The greatest burden the parents have is emotional breakdown, followed by economic hardships and physical fatigue. Depression, anxiety, and hopelessness scores and age of affected child are negatively correlated. The younger the child's age, the higher the scores. There is a strong, negative and opposite correlation between the parents' ages and depression scores. Although it is almost impossible for the families to avoid from the hard and long treatment process of the disease, to clarify the reasons behind the disease, activate the protective medical services, and if possible, do prenatal treatment in order to lessen the postnatal degree of the disease are highly significant. Therefore, financial and moral burden of the society are reduced.

**Disclosure of Interest:** None Declared

## EPP0949

### Relation between marital adjustment and somatic symptoms on parents of children with Spina Bifida

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doi: 10.1192/j.eurpsy.2023.1229

**Introduction:** Spina Clearance; which means; SB is a congenital disease. In the first month of pregnancy, the unborn baby's spine does not close properly is the result. In the spinal cord due to a developmental disorder often causes serious permanent disability. Multi-system associated with this congenital anomaly affected, families with infants and these infants are faced with major challenges in the future. Often the expectations of all parents is to have a normal, healthy children. The birth of a disabled child in the family, family members, their (lives, feelings, behaviors, social life) is a condition that affects negatively.

**Objectives:** The SCL-90 is a self-report clinical rating scale oriented toward the symptomatic behavior of psychiatric outpatients. The primary symptom dimensions measured by the SCL-90 are the nine

symptom constructs given below: somatization, obsessive-compulsive, interpersonal sensitivity, depression, anxiety, hostility, phobic anxiety, paranoid ideation, psychotism. Marital adjustment test: A 15-item scale that measures marital satisfaction. It was initially used to differentiate well-adjusted couples from distressed (unsatisfied) couples. The 15 items are answered on a variety of response scales.

**Methods:** In this study; The SCL-90 and Marital Adjustment Test have been applied on parents of children with Spina Bifida. A total of 40 persons were used which is 25 women and 15 men. Above of 1 score has been examined high level for SCL-90 test. For Marital Adjustment Test, we accept the lowest score is 1 and the highest score is 60. Cut-off score accepted is 43. If the parents have a score that is below 43, is determined incompatible, and is above 43 is determined compatible.

**Results:** The result has been obtained, showed us, the parents who have above 1 score for SCL-90, have below score 43 on Marital Adjustment Test.

**Conclusions:** The study shows that parents who have somatization problems are not aligned with their partners. Participants have symptomatic problems because of their children's health situation can cause an unaligned marriage. This suggests that parents of patients with diseases like SB should get the needed psychiatric help and supportive care during the course of treatment.

**Disclosure of Interest:** None Declared

## EPP0950

### Psychiatric Comorbidity and Length of Stay in a general hospital

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doi: 10.1192/j.eurpsy.2023.1230

**Introduction:** Psychiatric comorbidity has a significant impact on the patient's overall health, with an increased risk of death for those patients with mental-physical comorbidity (Tan et al., 2021). This impacts, among other things, the average hospital stay of a patient with psychiatric comorbidity. For example, an American study shows that psychiatric comorbidity was associated with greater inpatient utilization, including the risk of additional hospitalizations, days of stay, and hospitalization charges (Sayers et al., 2007). Our study aims to confirm these results in patients admitted to a general hospital for any cause and presenting psychiatric comorbidity.

**Objectives:** To compare the mean length of stay of patients admitted to a general hospital for any cause according to whether they have psychiatric comorbidity or not.

**Methods:** We made a descriptive retrospective study through the use of electronic medical records. The drug use history and average day of hospitalization were obtained for all patients admitted to the inpatient service of a general hospital during a 3-year period.

**Results:** The mean length of stay was longer in patients with psychiatric comorbidity (mean = 9.87 days, SD = 15.45) than in