

**Disclosure:** No significant relationships.

**Keywords:** Stress; resident; hospital; covid

## EPV0027

### The assessment of family caregivers' anxiety in pediatric epilepsy : a cross-sectional study

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doi: 10.1192/j.eurpsy.2022.996

**Introduction:** Pediatric epilepsy is a debilitating disease that impacts not only children with epilepsy but also persons around them. It is often considered as a source of anxiety for family caregivers.

**Objectives:** Assess the level of anxiety in caregivers of children with epilepsy and to identify factors related to it.

**Methods:** We conducted a cross-sectional, descriptive and analytical study between July and October 2020. It included caregivers of children with epilepsy hospitalized in the pediatric neurology department of Sfax. We used the STAI-Y scale to assess the level of state anxiety (STAI-AE).

**Results:** Forty four women participated in our study. Low socioeconomic level was found in 31.8% of cases. The average age of children was 4.9 years. The mean duration of epilepsy was 2.2 years. It was comorbid with an autism spectrum disorder or an intellectual disability in 15.9% of cases. In 70.5% of the cases, the children were dependent on their caregivers in their daily lives. The level of anxiety was moderate in 27.3% and high to very high in 13.6% of them. A higher state-anxiety score was correlated with a longer duration of epilepsy ( $p=0.033$ ), a lower familial socioeconomic level ( $p=0.013$ ) and a higher number of children in family ( $p=0.048$ ).

**Conclusions:** Pediatric epilepsy is associated with significant level of anxiety in family caregivers. This anxiety increases with the duration of the disease and with the presence of socioeconomic and family difficulties. Thus, psychosocial support for caregivers should be integrated into a global approach of the disease.

**Disclosure:** No significant relationships.

**Keywords:** Anxiety; epilepsy; Caregiver; Pediatric

## EPV0029

### Cognitive function in female patients with chronic functional constipation

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doi: 10.1192/j.eurpsy.2022.997

**Introduction:** Chronic functional gastro-intestinal disorders can affect cognitive functioning of patients (1). Wong et al (2) showed

attentional and executive function impairment, Aizawa et al. (3) found impairment of cognitive plasticity and activity of frontal and temporal areas of brain during performing tests in these patients.

**Objectives:** Assessing of cognitive functioning of the female patients with chronic functional constipation.

**Methods:** 42 Rome IV adult female patients with chronic functional constipation and 26 adult normative female volunteers were tested with Brief Assessment of Cognition in Schizophrenia (BACS).

**Results:** Both groups were comparable by age (patients' group  $29.5 \pm 6.1$ , volunteers' group  $28.5 \pm 9.6$ , ns) In both groups subjects demonstrated normal level of cognitive functioning but the scores of the patients were closer to the lower level than the scores of the volunteers. The difference was significant in composite scores and in several other scores (Tab.1). Table1.

BACS	Patients (n=42)	Volunteers (n=26)	p-level
Verbal Memory	49,5± 10,6	58,8± 7,1	0,0002
Work memory	48,2±10,1	51,7±8,4	ns
Motor token	51,3±10,5	59,8±10,4	0,003
Verbal fluency	52,1±11,5	56,5±9,9	ns
Symbol coding	45,1±8,4	54,8±12,7	0,015
Tower of London (planning)	50,2±10,7	57,6±10,2	0,015
Composite scores	49,1 ±10,1	59,9 ±7,4	0,0001

**Conclusions:** The findings of the study once more indicate some link between gastrointestinal dysfunction and cognitive functioning. Even these slight decrease in some aspects of cognition from normal population could have negative impact on everyday functioning. The origin of this link is still under question.

**Disclosure:** No significant relationships.

**Keywords:** chronic functional constipation; female; cognitive function

## EPV0031

### The evaluation of the effect of mindfulness and metacognition on anxiety symptoms: A case-control study

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doi: 10.1192/j.eurpsy.2022.998

**Introduction:** Anxiety disorders (ADs) are pervasive, detrimental, and associated with numerous psychiatric disorders; however, their etiology and effective treatment strategies are not yet fully explored.

**Objectives:** We aimed to study whether the symptom severity of ADs is related to mindfulness and metacognition among adults. In addition, we wanted to compare metacognition and mindfulness between patients with ADs and healthy controls (HC).

**Methods:** Two hundred participants were enrolled in this study. Structured clinical interview, sociodemographic form, Five Facet Mindfulness Questionnaire-Short Form (FFMQ-S), Metacognition Questionnaire-30 (MCQ-30), and Hamilton Anxiety Rating Scale (HAM-A) were administered. Multivariate analysis of covariance (MANCOVA) was conducted to compare the groups in terms of mindfulness and metacognition. Correlation and multiple linear regression analyses were performed to measure the association between anxiety symptom severity, mindfulness, and metacognition.

**Results:** The main finding indicates that Positive Beliefs about Worry are associated with reduced symptom severity of ADs. Furthermore, the results suggest that HC have more Positive Beliefs about Worry and Nonjudging of Inner Experience compared to patients with ADs, who use Negative Beliefs about Uncontrollability and Danger and Need to Control Thoughts to a greater extent.

**Conclusions:** This study suggests that dysfunctional metacognitive beliefs may influence symptom severity of ADs among adults. We advise that focusing on reducing maladaptive metacognitions may be beneficial while treating ADs in adults

**Disclosure:** No significant relationships.

**Keywords:** Anxiety; Mindfulness; metacognition; metacognitive beliefs

## EPV0032

### Psychogenic epidemic - mass hysteria phenomena in Portugal

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doi: 10.1192/j.eurpsy.2022.999

**Introduction:** Mass hysteria also called mass psychogenic illness (MPI), defined as a social phenomenon, consists of collective anxiety due to a perceived threat and can culminate in a cascade of symptoms suggestive of organic disease without an identifiable cause. Its history dates back to the 14th century and impacts people from all cultures and regions of the world. Before the 20th century, MPI emerged across Europe, often in socially isolated convents, in highly stressful environments.

**Objectives:** The aim of this study is to explore the available literature on mass hysteria phenomena in Portugal, historical origins, applications and eventual position in modern psychiatric semiology.

**Methods:** Non-systematic review of literature published in Medline/Pubmed. Search terms included: mass hysteria, nocebo, group-think, emotional contagion.

**Results:** In Portugal two great phenomena of mass hysteria were described. In 1917, the “sun miracle” occurred, where thousands of individuals reported having seen the sun rotating in the sky and changing its size and colours. Years later, more than 300 students from 14 schools described the same symptoms: dizziness, dyspnea and rash, without an identifiable cause. In common these young people had “sugar strawberries”. In May 2006, the young people in the television series were infected with a virus, and clinical picture was similar to that presented by young people in real life. For the first time, a fictional illness on television triggered an illness in real life.

**Conclusions:** More studies should be carried out on these phenomena as their early recognition can have a tremendous impact on the ease of identification, diagnosis and treatment.

**Disclosure:** No significant relationships.

**Keywords:** nocebo effects; mass hysteria; psychogenic illness

## EPV0033

### Hysteria in neurology: a diagnostic approach to conversive disorder

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doi: 10.1192/j.eurpsy.2022.1000

**Introduction:** Conversion disorder (a term that describes what was previously called hysteria) refers to motor or sensory symptoms, or both, that resemble a neurological disease, but that do not originate from or cannot be explained by a known physical disease.

**Objectives:** To find reliable tools that can guide the difficult diagnosis of conversion disorder.

**Methods:** Bibliographic review

**Results:** The exact prevalence of the disorder is unknown. It is estimated that approximately 5% of referrals to neurology are for this disorder. Approximately one third of patients referred to the neurologist have symptoms that cannot be explained by an organic disease. Involuntary movements are the most common motor manifestations of the conversive syndrome, being tremor one of the most frequent manifestations. The first differential diagnosis of conversion disorder is neurological disease. It is currently not necessary for the diagnosis to assess whether or not the symptoms are produced intentionally, as the assessment of conscious intentionality is unreliable. The neurological examination is the fundamental tool for the diagnostic approach, being even more enlightening than the complementary tests. Hoover's sign, Babinski's combined leg flexion, plantar flexion of the ankle, tremor and its distraction and synchronisation manoeuvres, as well as the clinical differences between epileptic seizures and non-epileptic seizures of psychogenic origin, are some of the reliable tools for a correct diagnosis.

**Conclusions:** The diagnosis of the disease should be one of exclusion. There must be clinical data showing clear evidence of incompatibility with a neurological disease and conversion symptoms do not correspond to known physiological mechanisms and anatomical pathways.

**Disclosure:** No significant relationships.

**Keywords:** neurology; conversive disorder; diagnostic; hysteria

## EPV0035

### Epileptic Seizures or not, that is the question: a case report

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doi: 10.1192/j.eurpsy.2022.1001