**Conclusions:** Risk factors for patients' insulin dissatisfaction should be detected early and managed appropriately to improve patients'satisfaction and consequently their well-being.

Disclosure: No significant relationships.

**Keywords:** Patient Satisfaction; Diabetes Mellitus; Type 2; Insulin; Aged

#### EPV0960

## Depression among type 2 diabetic insulin-dependent older adults

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**Introduction:** Although depression is one of the most common diseases among older people, it is still underdiagnosed due to frequent misleading symptoms.

**Objectives:** The aims of our study were to assess depression in type 2 diabetic insulin-dependent older adults and to identify factors associated with depression among this population.

**Methods:** A cross-sectional study on 100 type 2 diabetic insulindependent elderly recruited from the outpatient endocrinology consultation during June and July 2021. We applied the geriatric assessment scores: the Geriatric Depression Scale 15-item, the KATS score, the Lawton scale. the five-word test, the Mini Nutritional Assessment and the Timed Up and Go test.

**Results:** The mean age of the population was 70.8 $\pm$ 5.8 years with sex ratio of 0.85. Depression was noted among 57% of the patients who were distributed as follow: around one fifth (21%) had mild depression while 36% had moderate to severe depression. Around one quarter of the patients (24%) were dependent in the basic activities of daily living. Depression was significantly associated with dependency ( $\beta$  = 5.27; 95% CI, 1.01 to 27.35), ophthalmologic diseases ( $\beta$  = 8.81; 95% CI, 2.18 to 35.63), high frequency of nocturia ( $\beta$  = 3.71; 95% CI, 1.24 to 11.05) and high frequency of bleeding at insulin injection site ( $\beta$  = 4.21; 95% CI, 1.49 to 11.84). **Conclusions:** Our findings suggest that the prevalence of depression is high among type 2 diabetic insulin-dependent older adults. Early assessment of depression's risk factors is a major pillar of the comprehensive care of our seniors.

**Disclosure:** No significant relationships. **Keywords:** Insulin; Aged; Depression; Diabetes Mellitus; Type 2

#### **Oncology and Psychiatry**

#### **EPV0961**

### Psychosis as the Initial Presenting Symptom of Anti-Hu Encephalitis: A Case Series with Literature Review

E. Garrels<sup>\*</sup>, A. Zamiri, S. Pakniyat-Jahromi and S. Gunturu BronxCare Health System, Psychiatry, Bronx, United States of America \*Corresponding author. doi: 10.1192/j.eurpsy.2022.1690 **Introduction:** Anti-Hu related Paraneoplastic Neurological Syndrome (PNS) is one of the most common paraneoplastic-associated neurological syndromes (Kayser 2010). While the primary clinical manifestations are neurologic in nature (Smitt 2002), only rare reports exist regarding psychiatric manifestations. Our poster presents two cases of Anti-Hu Encephalitis manifesting as psychosis as well as a systematic literature review on the co-occurrence of psychosis and PNS. **Objectives:** The aim of this case series is to show psychosis as the primary symptom of a paraneoplastic syndrome that does not typically present in this way. It also serves as a reminder to have a detailed work-up and maintain a wide differential diagnosis when evaluating patients with first-episode psychosis.

**Methods:** Two cases of anti-Hu encephalitis primarily presenting with psychiatric symptoms are discussed. A systematic literature review was carried out based on the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) model on three electronic databases: PubMed, Embase, and PsycINFO. Search terms included were (Anti-Hu) AND (Psychosis OR Hallucinations OR Schizophrenia OR Schizoaffective).

**Results:** Our case series reports on two patients with diagnosed anti-Hu encephalitis who were treated by our psychiatry team, where the primary manifestations of the illness were psychiatric in nature. Psychotic symptoms in these cases were managed with Risperidone, Olanzapine, and Paliperidone.

**Conclusions:** Psychotic symptoms are seldom reported in the literature and cases like the ones presented emphasize the importance of a full medical work-up for first episode psychosis as well as a wide differential. Given the increased association between PNS and psychiatric illness, more emphasis and further research is warranted.

**Disclosure:** No significant relationships. **Keywords:** Psychosis; Anti-Hu; Encephalitis

#### EPV0962

# Subjective expectations from radiotherapy and chemotherapy in patients with oncological illnesses

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**Introduction:** Expectations and fears about chemotherapy and radiotherapy in patients with oncological illness may not only affect their subjective well-being (Shaverdian et al., 2018) but also treatment satisfaction and complaints of side effects (Guidolin et al., 2018, Dong et al., 2014, Colagiuri et al., 2013).

**Objectives:** The aim was to compare beliefs about treatment in patients referred to radiation therapy and chemotherapy, and to reveal their relationship to health anxiety and subjective well-being. **Methods:** 53 patients referred to radiation therapy and 63 patients referred to chemotherapy completed the Treatment Perception in Oncological Illnesses Scale (Kovyazina et al., 2021), Illness and Treatment Self-Regulation Questionnaire (Kovyazina et al.,

2019), Satisfaction with Life Scale (Diener et al., 1985) and Scale of Positive and Negative Experiences (Diener et al., 2009).

**Results:** Compared to radiation therapy, with chemotherapy, patients tend to be more doubtful about the effectiveness of treatment and more anxious about the need for it (p<.05). Moderated mediation analysis demonstrated that lack of understanding, doubts about the effectiveness and anxiety about radiation and chemotherapy are associated with subjective ill-being indirectly - through a higher level of health anxiety ( $\beta$ =-.79--.35, SE=.17-.26, 95% CI [-1.42 - .75 - .37 - -0,08]). Feelings of helplessness regarding treatment mediated the relationship between doubts and confidence about treatment effectiveness and well-being in both groups.

**Conclusions:** Results demonstrated that some fears and expectations about chemo- and radiotherapy could provoke health anxiety and helplessness regarding treatment that is related to poorer well-being.

**Disclosure:** No significant relationships. **Keywords:** oncology; radiotherapy; chemotherapy

#### **EPV0963**

### Psychological impact of pediatric cancer : a crosssectional study among thirty parents

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**Introduction:** The diagnosis of pediatric cancer is a traumatic event that is considered to be one of the most adverse situations the child and his family can experience. The psychological impact of this diagnosis on the parents has triggered a great scientific attention in these recent years.

**Objectives:** Estimate the prevalence of depression and post-traumatic stress among parents of children with cancer.

**Methods:** Our study was cross-sectional over a period of 1 month in the medical carcinology department at the Salah Azaeiz Institute. We used the Beck Depression Scale II and the Post Traumatic Stress Disorder Cheklist-Civilian assessements.

**Results:** Thirty parents participated in our study. Most of whom were mothers (73%). The educational level was primary in 63% of cases and socio-economic level was average in 60% of parents. 40% of parents were assessed within six months after diagnosis. Prevalence of depressive disorder and post-traumatic stress disorder were 73% and 57% respectively. The low educational level was correlated to the presence of these two disorders. Similarly, the low educational level was correlated to the presence of depressive disorders (p=0.008). The number of children in the family was also associated to the presence of post-traumatic stress disorder (p=0.029).

**Conclusions:** The prevalence of depressive and post-traumatic stress disorders was high among parents of children diagnosed with cancer. The low socio-economic and educational level and the large number of children in the family are risk factors for psychological distress. Psychosocial support should be offered to parents of children with cancer to optimize the management of this disease.

**Disclosure:** No significant relationships. **Keywords:** cancer; PTSD; Child; Depression

#### EPV0965

## Coping strategies among mothers of children with leukemia in Tunisia

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**Introduction:** The diagnosis of leukemia in a child is traumatic life experience that negatively affects parents and especialy the mother which is the "caregiver" who assists and coordinates all stages of treatment.

**Objectives:** To determine the prevalence of psychological distress among mothers of tunisian children with leukemia and to investigate their coping strategies.

**Methods:** A cross-sectional study was conducted at Aziza Othmana hospital department of pedo-oncology in Tunisia between June and July 2021. HADS scale was used to estimate the prevalence of anxiety and depression and coping strategies were measured via arabic version of the brief cope scale.

**Results:** We included 31 mothers, their middle age was 41 years old. In this study we didn't include mothers with psychiatric history. Acute lymphoblastic leukemia was the most frequent type of cancer in our sample (94%). The middle age of the children was 10 years old and all of them were under chemotherapy. Clinically significant levels of anxiety and depression were reported by 58% and 49% of mothers, respectively. In our study, 81% of the participants practiced prayer and all mothers turned to religion as a coping strategy. Approach coping styles (especially acceptance and planning) were more frequently used than avoidant coping styles (especially substance use and denial).

**Conclusions:** Mothers are profoundly affected by a child's cancer diagnosis, they should have early assessment of their mental health needs to have access to appropriate interventions.

**Disclosure:** No significant relationships. **Keywords:** coping; psychooncology; leukemia; mothers

#### **EPV0966**

## Is the Living Will an interesting way to determine themselves? Qualitative research about considerations said by oncologists in a university service care in Southeast Brazil.

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**Introduction:** What does the physician think in his/her intimacy about clinical care for when his/her death would be near? Living Will is a type of advance directive with the aim to guarantee the testator's autonomy when faced with death. Particularly oncologists are often faced with human finitude. Their delicate work does not protect them from the possible anguish of thinking and preparing for their own death. It is pertinent to know the psychic mechanisms normally present in the management of this expectation.