O0026

The manifestation of anxiety in patients undergoing elective coronary angiography

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Introduction: Prevalence of anxiety disorders in coronary artery disease reaches up to 15% and about half of patients with coronary artery disease have anxiety or depression comorbidity. Prevalence of anxiety in patients undergoing percutaneous coronary intervention ranges from 24% to 72%. Anxiety can be the source of distress and is associated with poor prognosis, impaired health-related quality of life and can cause cardiac dysfunction.

Objectives: We aimed to determine the prevalence of anxiety and its association to coping strategies and personality traits in nondepressed patients undergoing elective coronary angiography, a diagnostic procedure for coronary artery disease. We also aimed to determine the correlation of state anxiety to elective coronary angiography finding and its expression over time.

Methods: This was a single-center, cross-sectional, prospective study. Anxiety was evaluated at four-time points using self-rating questionnaires: 14 days prior to and 2–4h before procedure; 24h after procedure and 6 weeks after discharge. The association between anxiety and psychological variables was assessed by multiple linear regression and by linear mixed effect model.

Results: A total of 259 non-depressed patients were included in the final analysis (median age 65, 32% were female). Prevalence of anxiety was 35% and was higher in patients with avoidance-oriented coping style (p<0.001), meanwhile low neuroticism (p<0.001) and extrovertive personality trait (p=0.032) were protective factors. Patients that had no intervention (p=0.022) or had percutaneous coronary intervention (p=0.010) during elective coronary angiography, had lower anxiety than patients in need for coronary artery bypass graft surgery.

Conclusions: Personality traits emotional stability and extroversion are protective factors against anxiety. More than one third of patients experienced clinically significant anxiety before procedure. Our results suggest that recognising anxiety in patients undergoing elective coronary angiography is important. Further on, application of effective interventions for reducing/treating anxiety before or after procedure is needed.

Disclosure of Interest: None Declared

O0027

Suicide in cancer patients: incidence and risk factors (literature review)

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Psychiatric department, faculty of medicine of tangier, Tangier, Morocco *Corresponding author. doi: 10.1192/j.eurpsy.2023.234 **Introduction:** Suicide is considered an important public health problem in contemporary society. Over 800,000 deaths by suicide are estimated each year and the mortality rate is 11.4 per 100,000 people. In people with cancer, depression is a high-prevalence disorder that affects patients' ability to cope with illness, decreases treatment acceptance, prolongs hospitalization, reduces quality of life, and increases the risk of suicide. In turn, the diagnosis of cancer is a serious stressor, with many physical and psychological consequences, and is thought to be a risk factor for suicide.

Objectives: This study aimed to perform a literature review on the incidence and risk factors of suicide in cancer patients

Methods: the search for articles was carried out in the electronic scientific databases PubMed, ScienceDirect and Scopus. Variables studied included suicide rate, type of cancer, demographic characteristics, and signs and symptoms associated with suicide using the descriptors "suicide" and "cancer".

Results: 42 articles were selected. As in the general population, the risk of suicide was higher in men with cancer than in women with cancer. Cancer patients aged 65 or older have a higher suicide rate than those under 65. Prostate, lung, pancreatic, bladder and colorectal cancers are the types most at risk for suicide. The first year after diagnosis carries a higher risk of completed suicide. Multiple risk assessment tools have been developed and are effective in identifying patients with depression or hopelessness, factors associated with a higher risk of suicide. However, there are no tools that can sensitively and specifically predict suicide.

Conclusions: The incidence of suicide in a person diagnosed with cancer is approximately double the incidence of suicide in the general population. Early detection of depression in particular cancer populations, such as older male patients, can help identify those most at risk for suicide.

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Consultation Liaison Psychiatry and Psychosomatics 2

O0028

Physical and psychoeducation combined group intervention: a quasi-experimental study with Portuguese cancer survivors

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Introduction: Cancer is a major public health problem worldwide and the risk of death from cancer has decreased continuously since