

Conclusions: College students self-report a poor sleep and the prevalent personality dimensions are Conscientiousness and Emotionality. Students with higher levels of Emotionality (fearfulness, anxiety, dependence and sentimentality) presented a poor sleep. To conclude, mediation studies are needed in order to better understanding the link between personality and sleep.

Keywords: Personality; College students; sleep quality; Emotionality

EPP1291

Perinatal depression as a risk-factor for infant sleep disturbances: Subjective data from a case-control study

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Introduction: Perinatal period is characterized by a broad range of physical, psychological and relational changes. Maternal perinatal depression (PD) is defined as an episode of major depression with the onset from pregnancy to the first year after delivery. Depressive symptoms influence the earlier mother-child interaction and impact on child cognitive, affective and behavioral development.

Objectives: Purpose of our study was to evaluate the consequences of PD on sleep-wake patterns in the early stages of infant development. We aim to investigate the presence of poor sleep in infants/toddlers and also to identify differences in sleep ecology variables.

Methods: We enrolled, from December 2019 to September 2020, a clinical sample of children born from women with PD (N=19, m.a.=13,7, SD= 7,6) and a healthy control group (N=21, m.a.=15,5, SD=5,43). Infant sleep data were obtained from the Brief Infant Sleep Questionnaire (BISQ). Poor sleepers were defined by the following criteria: >3 night wakings, nocturnal wakefulness >1 hr or total sleep duration <9 hr. Maternal depression was assessed with clinical and psychometric evaluation. T-test was used for comparison between the two samples.

Results: Statistical analysis indicates that there were not significant differences between the two groups concerning night wakings (p=.678), nocturnal wakefulness (p=.815), total sleep duration (p=.209) and nocturnal sleep onset time (p=.475).

Conclusions: Our findings suggest that PD is not a risk-factor in the onset of infant sleep problems. Probably negative parenting, affective disengagement, delegation in maternal care and sedative effects of pharmacotherapy may affect mother's perception of her infant's sleep.

Keywords: Perinatal depression; sleep disorders; Mother-child interaction; Relational changes

EPP1292

Association between brain-derived neurotrophic factor and symptoms of insomnia and depression in inflammatory bowel disease (IBD) patients.

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Introduction: Brain-derived neurotrophic factor (BDNF) plays an important role in depression and sleep disorders. It influences the inflammatory process and may affect the interactions between psychological state and gastrointestinal symptoms.

Objectives: The study aimed to compare BDNF concentrations in the group of Crohn's disease (CD), ulcerative colitis (UC) patients, and healthy control (HC), as well as to correlate it with the severity of depression and insomnia.

Methods: The study included 94 inflammatory bowel disease patients (IBD, 57 CD, and 37 UC) and 26 HC. Each participant completed the following questionnaires: Pittsburgh Sleep Quality Index (PSQI), Athens insomnia scale (AIS), and Beck Depression Inventory (BDI). BDNF protein concentration measurements were performed using ELISA. Funding: National Science Centre, Poland-2018/31/N/NZ5/03715.

Results: CD patients had a higher serum level of BDNF (22.5 ng/mL, IQR:17.5-28.5) than UC patients (19.1 ng/mL, IQR:12.3-24.6; p=0.045). CD group had higher BDNF concentrations than HC (17.5 ng/mL, IQR:13.2-23.8; p=0.010), but no such differences were found between UC and HC groups (p=0.544). A positive correlation was found between AIS and BDNF among IBD (r=0.22, p=0.035). Additionally, patients, who obtained high BDI scores (>7 points) had lower BDNF concentrations than others (p=0.004). The patients with long sleep latency (>10 min) achieved a higher BDNF level than others (p=0.038). However, BDNF level did not correlate with PSQI results.

Conclusions: BDNF serum level is increased in CD, but not in UC patients. Overall, the severity of insomnia symptoms correlates positively with BDNF levels. Future research should focus on the further explanation of those observations.

Keywords: BDNF; Insomnia; psychosomatics; inflammatory bowel disease

EPP1293

Chronic upregulation of circadian clock protein per1 among OSA patients

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Introduction: PER1 is a repressor protein involved in regulating circadian rhythm. While obstructive sleep apnea (OSA) is characterized by recurrent pauses in breathing caused by the collapse of the upper airways it might be associated with disruption of the circadian clock.

Objectives: The study aimed to assess PER1 protein in OSA patients and evaluate its association with PSG parameters.

Methods: The study included 40 individuals, who underwent diagnostic polysomnography (PSG) examination. Based apnea-hypopnea index (AHI) patients were divided into groups: control (AHI<5; n=10) and OSA (AHI5; n=30). All participants had their peripheral blood collected in the evening (9:00-10:00 pm) before

and in the morning (6:00-7:00 am) after the PSG. PER1 protein concentration measurements were performed using ELISA. Funding: National Science Centre, Poland-2018/31/N/NZ5/03931.

Results: The control and OSA group were match in sex and age, while differed regarding BMI ($p=0.039$), desaturation index ($p<0.001$) and AHI ($p<0.001$). PER1 protein level was elevated in OSA group compared to control both in the evening (322.384.1vs.208.460.1pg/ml; $p<0.001$) and morning (314.891.9vs.228.157.3pg/ml; $p=0.002$). No difference was observed between evening and morning PER1 level ($p=0.946$). Morning PER1 correlated with AHI ($r=0.400$; $p=0.011$), desaturation index ($r=0.391$; $p=0.013$), age ($r=-0.312$; $p=0.049$) and BMI ($r=0.383$; $p=0.015$). In a multiple linear regression model ($R^2=0.268$; $p=0.003$) morning PER1 protein level was influenced by age ($p=0.006$) and AHI ($p=0.025$), while BMI and desaturation index were not significant.

Conclusions: OSA patients might suffer from circadian clock disruption, which is mainly associated with the severity of the disorder and age. Further studies are needed as this dysregulation can result in metabolic and mood disorders often observed in this group of patients.

Keywords: OSA; circadian clock; PER1; PSG

EPP1294

Sleep disorders among health care workers practicing in emergency department in south tunisia

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Introduction: Sleep disorders are the most common health problem among the health care staff, mainly those who perform night shifts.

Objectives: To assess the prevalence of sleep disorders among health care workers in emergency department and to determine its associated factors.

Methods: It was a cross-sectional study, including health care workers assigned to emergency ward and intensive care unit of Hedi Chaker and Habib Bourguiba hospitals in Sfax and regional hospital of Kebili, during the first six months of 2017. We used an anonymous and confidential self-administered questionnaire. We used hospital anxiety and depression scale (HAD) to assess anxiety and depression. Sleep quality was assessed by the Pittsburgh Sleep Quality Index and day time sleepiness by the Epworth Sleepiness Scale.

Results: 240 nurses were included. Mean age was 37 years-old, 59.2% were female and 64.2% were married and 79.2% assured night shifts. The prevalence of sleep disorders was 70.4%. Sleep difficulties were significantly correlated with anxiety ($p=0.001$) and depression ($p=0.02$). In multivariate study, sleep disorders were related to the absence of leisure activity (OR=0.42 [0.19-0.94]; $p=0.035$) and anxiety (OR=3 [1.4-6.1]; $p=0.002$). 40.8% of nurses experienced drowsiness. Sleepiness was significantly correlated with the absence of leisure activities ($p=0.04$) and with psychiatric family history ($p=0.02$). In the multivariate study, sleep disorders were correlated with female gender (OR=0.43 [0.19-0.9]; $p=0.042$) and with no leisure activity (OR=2.6 [1.2-5.6]; $p=0.01$).

Conclusions: Sleep disorders were common among emergency nurses, in order of that; working conditions should be improved to provide less stressful conditions for nurses.

Conflict of interest: No significant relationships.

EPP1295

Severity of insomnia among counseling patients in psychiatry

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Introduction: Insomnia is a frequent reason of consultation in psychiatry. Always it is associates to other psychiatric pathologies. After stabilisation of the main disorder, it can become the only complaint.

Objectives: This study aimed to assess the prevalence of severe insomnia among patients suffering from different psychiatric disorder, and their sociodemographic profile.

Methods: It is a cross sectional study conducted in February 2020 at the psychiatric ward of the military hospital of Tunis, including 80 patients who responded to the questionnaire of Insomnia Severity Index (ISI).

Results: The study included 80 patients (18 to 66) years old with average age 38.78. The questionnaire showed that 26.92% didn't have any sleep disorder, 25% had light insomnia, 42.30% had mild insomnia and only 5.76% suffered from severe insomnia. The patients counseling for anxiodepressive disorders were 48%, for PTSD were 17.46% and 17.3% for psychosis. Military population represented 80% of total patients interviewed and the average of years of service was 17.7 years. The single patients were 46% the others were married. 70% of the patients were under hypnotic drugs besides the main treatment.

Conclusions: Sleep disorders have a significant impact on cognitive functions and life quality which should be separately studied. Despite of well conducted pharmacotherapy, some patients still suffering from severe insomnia, it can be attributed to the main psychiatric disorder, relapse, treatment resistance, substance abuse... The importance of the psychiatrist involvement in screening and treatment can obviously enhance the prognosis. Other therapeutic alternatives which are non pharmacological such as phytotherapy and CBT should be proposed to patients.

Keywords: prevalence; Insomnia; Insomnia Severity Index

EPP1297

Parental postpartum affective disorders as a risk factor for infant bedtime resistance

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