

Results: Structural equation modeling shows that SWB-P is related directly to gender (less well-being in women), dispositional optimism, adaptive coping and destructive coping (negatively). The negative effect of defensive optimism was mediated only by destructive coping ($p < 0.001$), the effects of constructive optimism on well-being was mediated by adaptive and destructive coping (both $p < 0.01$) ($\chi^2(4) = 8.97$; $p = 0.06$; CFI = 0.996; TLI = 0.978; RMSEA = 0.030; PCLOSE = 0.886).

Conclusions: Dispositional optimism together with situation-specific defensive and constructive types of optimism and coping are essential for explaining well-being during Covid-19 lockdown.

Keywords: destructive coping; well-being; COVID-19 pandemic; Defensive optimism

EPP1464

Spousal abuse and its determinants

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Introduction: Spousal abuse (SA) against women, by its frequency and its consequences on the health of the victims, is a public health issue. For this reason, the role of the physician is essential not only in the care of victims but also in the study of the determinants of (SA).

Objectives: To study the profile of women who have experienced (SA), their spouses and to evaluate the factors associated with spousal violence.

Methods: Analytical and descriptive cross-sectional study conducted among married patients who consulted the National Health Fund of Sfax (CNSS) during the months of October and November 2019. The sociodemographic and clinical characteristics of the victims and their spouses were collected using a pre-established form.

Results: 57.3% of the population was affected by (SA). The mean age of female victims was 48.35 years ($SD = 9.82$). 66.7% of women had a primary school level and 69% had a median socioeconomic level. The majority (60.3%) were housewives. 78.18% had a somatic history. The average age of spouses was 53.82 ($SD = 10.87$). 73% had an elementary school education and 49% were workers. The spouse's somatic history was found in 63.5% and psychiatric history in 11.11%. 39.68% of spouses had addictive behaviours. Factors correlated with (SA) were: low education levels of the wife ($p = 0.016$) and husband ($p = 0.0057$), history of childhood abuse of the victim ($p < 0.0001$), addictive behaviours of the husband ($p = 0.008$).

Conclusions: It seems that the evaluation of the characteristics of women victims of (SA) and their spouses, as well as the identification of factors associated with (SA), are essential in order to cope with this scourge and avoid its repercussions.

Keyword: spousal abuse-victims-determinants-profile

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Perinatal grief characteristics

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Introduction: Perinatal grief is the reaction to the death of a loved one in the perinatal period (according to the WHO, it ranges from 22 weeks of gestation to the 1st week of postnatal life). Despite the fact that perinatal grief presents a set of distinctive characteristics, it is not recognized as a differentiated entity in the main diagnostic manuals (DSM-5 and ICD-11). There are a number of characteristics that make perinatal grief a different grief reaction. Characteristics that make perinatal grief a different grief reaction:

General characteristics: Proximity between the beginning and the end of life, the lack of religious rituals that legitimize the loss. Physiopathological characteristics; The gestational hormone increase act in the brain favoring emotional bonding with the child and facilitating care, sustained modifications in the gabaergic, endorphinic and nitrinergic synapses in the mothers' brains. Increased physical activity of the fetus during the third trimester increases the mother's basal metabolism and changes her emotional reaction. Clinical characteristics; feelings of guilt, loneliness and detachment, irritability, dissociative symptoms, concern dead son and angry reactions.

Objectives: Search for the specific characteristics of perinatal grief and the importance of its therapeutic approach.

Methods: Literature review using pubmed database and scientific dissemination articles.

Results: Between 10 and 50% of mothers who suffer perinatal grief develop depression disorder, 50% have anxiety disorders that usually reappear with the possibility of a new pregnancy, and between 5 and 25% are diagnosed with post-traumatic stress disorder.

Conclusions: Perinatal grief has characteristics that differentiate it from other grief reactions; mental health professionals must attend to and understand these specificities in order to attend it.

Keywords: Grief; perinatal; pregnancy

EPP1467

Voluntary interruption of psychotic pregnancy: Use of antipsychotic drugs in a bioethical case.

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Introduction: Decisions about use and safety of antipsychotic drugs during pregnancy it's been a controversial issue in psychiatric practice because of the difficult finding the good choice, ethically and medically.