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Women's Mental Health and Pregnancy Loss: What Should We Be Aware Of?

C. Fernandes Santos

Hospital Garcia de Orta, Department Of Psychiatry And Mental Health, Almada, Portugal
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Introduction: Pregnancy loss (PL) – by induced or spontaneous termination of pregnancy – is common, although its consequences on women’s mental health are often neglected in clinical practice. Objectives: To understand the existence of psychiatric morbidity in women, associated with PL, as well as related risk factors.

Methods: Non-systematic review of literature through search on PubMed/MEDLINE for publications up to 2021, following the terms ‘pregnancy loss’, ‘psychiatry disorder’, ‘depression’ and ‘anxiety’.

Results: After a PL, anxiety is the most frequent symptomatology in 41% of women. Depression occurs in 22-36% of women in the first two weeks after PL, declining over time. Symptoms compatible with Post Traumatic Stress Disorder (PTSD) are found in 25% of women with PL in the first month. Women who meet criteria for PTSD are more likely to present criteria for Depressive Episode. Substance Use Disorder and Prolonged Grief Disorder are also reported, the latter having, as predictors, previous relational difficulties, poor social support and absence of descendants. Risk factors associated with significant psychopathology within PL are, for example, nulliparity, infertility, previous PL, longer gestation time, lower marital satisfaction, previous psychiatric illness, and history of abuse.

Conclusions: In clinical practice, the risk of psychopathology in women with PL should be considered. This population should be actively questioned about the presence of symptoms, as well as their persistence and impact, requiring timely and appropriate pharmacological and psychotherapeutic intervention. Perinatal Mental Health interventions show important gains in the overall health of women and their offspring.

Disclosure: No significant relationships.

Keywords: Pregnancy; women; pregnancy loss; perinatal mental health

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Addressing the sexual and reproductive health of women with Bipolar Disease

A. Vieira¹*, F. Ramalheira², I. Caldas³ and I. Vidó³

¹Centro Hospitalar Psiquiátrico de Lisboa, Ccsmo, Lisbon, Portugal; ²Centro hospitalar Psiquiátrico de Lisboa, Serviço De Electroconvulsoterapia, Lisboa, Portugal and ³Centro Hospitalar Psiquiátrico de Lisboa, Psiquiatria Geral, Lisboa, Portugal

*Corresponding author.
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Introduction: Bipolar disorder (BD) is a severe mental illness (SMI) with an estimated lifetime prevalence of around 1%, starting in young adulthood and progressing with acute episodes. Although there is no significant prevalence difference between the sexes, the course of the disorder may be more problematic in women, due to hormonal and reproductive factors. Moreover, hypersexuality and impulsive sexual behaviour can manifest as part of a manic or hypomaniac episodes, with devastating effects on the physical and emotional health of these patients.

Objectives: To highlight the pertinent issues related to sexual and reproductive health of women with BD.

Methods: A non systematic review of the literature from the last 10 years was carried out using the electronic databases, Pubmed and Google Scholar. The literature search was confined to papers written in English. The keywords ‘sexual health’, ‘reproductive health’, were combined with ‘bipolar disorder’ and ‘women’.

Results: The literature points to an increased incidence of unsafe sexual practices (unprotected sex, multiple sexual partners, trading sex) as well as poor reproductive and sexual health (increased risk of sexually transmitted diseases, high risk of unwanted pregnancies and abortions, low use of contraceptives, menstrual and fertility problems). Female patients with BD are also more likely to report history of sexual abuse.

Conclusions: Attention and counseling regarding effective contraception, planning a pregnancy and risk of sexually transmitted diseases, among others, should be an integral part of health care received by all women with bipolar disorder.

Disclosure: No significant relationships.

Keywords: bipolar disorder; women; Sexual and Reproductive Health
Conclusions: Considering the prevalence and impact of mental health issues in the perinatal period, it is desirable to structure interventions with a holistic and multidisciplinary approach. Perinatal mental health should be prioritized during the entire process of pregnancy and postnatal period. A network of primary and secondary care systems may allow mitigating and/or overcoming vulnerabilities.

Disclosure: No significant relationships.

Keywords: programme; women; perinatal mental health; intervention

EPV1663
Women’s mental health during the COVID 19 pandemic and the problem of domestic violence in a lockdown situation

M. Kachaeva*, N. Semenova, S. Shport, V. Vasyanina, O. Shishkina, N. Skibina and L. Nazarova

1V. Serbsky National Medical Research Centre for Psychiatry and Narcology, Forensic Psychiatry, Moscow, Russian Federation; 2Moscow Research Institute of Psychiatry, Clinical Psychology Counseling, Moscow, Russian Federation; 3V. Serbsky National Medical Research Centre for Psychiatry and Narcology, Moscow Research Institute Of Psychiatry, Moscow, Russian Federation and 4I. M. Sechenov First Moscow State Medical University, Forensic Psychiatry, Moscow, Russian Federation

*Corresponding author.
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Introduction: The current situation caused by restrictive measures related to the COVID-19 pandemic provokes the high level of aggressiveness and all forms of domestic violence. These results in mental health problems.

Objectives: The purpose of this study was to find out the consequences of domestic violence against women and to identify psychological problems and mental disorders in women.

Methods: A cohort of 18 females was examined by psychiatrists and psychologists. All women turned to specialists at the Moscow Institute of Psychiatry for help.

Results: All women were victims of violence by their husbands and partners. Lockdown situation associated with COVID 19 pandemic has exacerbated the problem of domestic violence. Clinical assessment has revealed different depressive symptoms, anxiety, fear, suicidal tendencies forming the clinical picture of adjustment disorder (2 cases), acute reaction to stress (3 cases), post-traumatic stress disorder (2 cases), depressive episode (8 cases), eating disorders behavior in the form of bulimia and anorexia (3 cases).

Conclusions: The research has revealed that domestic abuse against women associated with lockdown situation during the COVID 19 pandemic often results in psychological and long-term mental health problems. In these cases, prevention is needed to combat violence against women with the participation of public health specialists, psychologists, psychiatrists, sociologists.

Disclosure: No significant relationships.

Keywords: women; women; mental health;

EPV1665
The impact of sexual hormones on depressive symptoms and alcohol use in a woman with delusional disorder at the perimenopausal stage: case report and review of recent works

G.F. Fucho, L. Delgado, A. González-Rodríguez, A. Guàrdia, A. Álvarez, S. Crivillès, J.D. Barbero, J.A. Monreal, J. Labad and D. Palau Vidal

1Parc Taulí University Hospital, Department Of Mental Health, Sabadell, Barcelona, Spain; 2Mutua Terrassa University Hospital, Department Of Mental Health, Terrassa, Spain; 3School of Medicine, Universitat Autònoma de Barcelona, Medicine, Cerdanyola del Vallès, Spain; 4Centro de Investigación Biomédica en Red de Salud Mental (CIBERSAM), Salud Mental, Madrid, Spain and 5Hospital of Mataró, Consorci Sanitari Del Maresme, Mataró, Spain

*Corresponding author.
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Introduction: The influence of sexual hormones on mental disorders have been extensively reported. In fact, recent studies suggest that sex hormones may play a relevant role in the pathophysiology of psychosis, may be a precipitant when exogenously administered or even be used as a treatment agent of psychotic disorders.

Objectives: To describe the case of a patient with a recent diagnosis of delusional disorder (DD) with an onset in the perimenopausal period.

Methods: Case report and narrative review focused on the impact of sexual hormones on depressive symptoms and alcohol use comorbidity during perimenopause in DD women by using PubMed database.

Results: Case report: A 48-year-old woman diagnosed with DD. The clinical assessment of climacteric symptoms, as well as the gonadotropins (elevated levels of follicle-stimulating hormone -FSH- and luteinizing hormone -LH-) and estrogen levels monitoring (variations on 17-β estradiol -E2-) enabled to link the endocrine changes with the onset and course of the psychiatric disorder. During the development of the disease, the patient also presented comorbid depressive symptoms and alcohol use disorder. Review: Estrogen depletion seems to increase the risk of psychosis, while scientific literature is not conclusive in establishing a definitive relationship between depressive symptoms and hormonal imbalance in DD. Alcohol use disorder is a common comorbidity in both perimenopausal women and patients with DD.

Conclusions: Multiaxial management of the case helped clinicians to achieve clinical stabilization. Sex differences as well as hormonal pattern disturbances should receive special attention due to the seminal implications in pharmacotherapy and clinical outcomes.

Disclosure: No significant relationships.

Keywords: Delusional disorder; Depression; Alcohol use; sexual hormones

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Self-esteem in Moroccan women: comparison between different age groups and influencing factors

A.K. Rhaouti, A. Khalilou, S. Belbachir, A. Ouanaas and O. Belahdir

1Hôpital Ar-Razi, Men’s Unit B, Sale, Morocco; 2University Psychiatric Hospital Ar-razi, university hospital center, SALE, Morocco,