Objectives: To provide an example of a real case to shed light about the psychopharmacological and ethical management of the situation helping a psychotic patient to make a voluntary decision.

Methods: Expose a clinical case of a patient in a psychiatric institution for several psychotic symptoms who we discover she's pregnant during her hospitalization and treatment process. She is a 36 years old single woman who shows disorganized maniac psychotic behavior including disinhibition, promiscuity, persecutory and symbolic delusional ideas, self-surrender and insomnia. She's admitted against her will in a University Hospital, being transferred to a Psychiatric Hospital with risperidone (2mg/24h) and clonazepam 2mg (2mg/24h). She had a positive pregnant test. Receiving the patient, we made an updated bibliographical review about use of antipsychotic during pregnancy, consult with the patient's family and hospital legal advice's service and coordinate with Gynecology's service. The patient was ambivalent about the decision conditioned by her symptoms.

Results: We decide to optimize drugs to olanzapine (until 30mg/24h) during the first week not using mood stabilizers because of malformations risk, with a great amelioration of symptoms, experiencing a back to reality with a coherent speech and eutimia, deciding a voluntary interruption of pregnancy.

Conclusions: Psychosis in pregnancy can be a bioethical challenge wich must be management according to science (practice clinical guidelines point olanzapine as a choice to be considered) and woman's will.

Keywords: psychosis; bioethica; antipsychotic; pregnancy

EPP1468

Black and south asian women's pathways to accessing community and inpatient perinatal mental health services: An analysis of local service data from the paam study

N. Jovanovic

Unit For Social And Community Psychiatry, Queen Mary University of London, London, United Kingdom
doi: 10.1192/j.eurpsy.2021.1611

Introduction: Women from ethnic minorities who experience mental health problems during the perinatal period are disproportionately represented in involuntary care. They have poorer access to community care but have higher engagement with services once accessed. Their pathways to accessing perinatal mental health care remain underexplored.

Objectives: To investigate the pathways to perinatal mental health services for women across different ethnic groups, including number of caregivers encountered and time elapsed between referrals.

Methods: Analysis of patient records and routine service data from community and inpatient perinatal mental health services in the United Kingdom. Use of an adaptation of the WHO's pathway encounter form.

Results: Women from ethnic minority groups experience increased levels of complexity on their journey to accessing perinatal mental health care. We will present a detailed analysis of patient and service characteristics.

Conclusions: Referral pathways to perinatal mental health services need to be optimised for women from underrepresented groups.

Keywords: Ethnicity; perinatal; Access; Pathways

EPP1470

Female sexual dysfunction after breast cancer surgery prediction with AI

A. Mereu

Research performed independently, Cagliari, Italy
doi: 10.1192/j.eurpsy.2021.1612

Introduction: Female sexual dysfunction (FSD) can be overlooked. Different types of breast cancer surgery could have a different impact on the sexuality of women. Artificial intelligence (AI) could help to determine the relation between those conditions.

Objectives: To investigate whether AI could predict FSD relying primarily on the time elapsed after treatment and the type of breast cancer surgery.

Methods: Data of age, time elapsed after treatment and type of surgery (breast-conserving therapy and mastectomy) were employed to predict FSD status in 128 subjects using an AI. Women with and without steady relations were included in the analysis. FSD prevalence was 27.3%. The AI was conservatively tuned to maximize the positive likelihood ratio considering predicted and real FSD statuses. The free and open source programming language R was used for all the analyses. Dataset source: Nowosielski, Krzysztof; Krzystanek, Marek; Kowalczyk, Robert; Streb, Joanna; Kucharz, Jakub; Głogowska, Iwona; Lew-Starowicz, Zbigniew; Cedrych, Ida (2018), "Data for: Factors affecting sexual function and body image of early stage breast cancer survivors in Poland: A short-term observation.", Mendeley Data, V1, doi: 10.17632/948n98trm6.1

Results: Predictions obtained a positive likelihood ratio of 5.314. The results were indicative of fair performance.

Conclusions: AI might be useful to predict FSD in women who undergo breast cancer surgery. Furthermore, the results of this study might indicate a moderate effect of age, time after treatment and type of surgery on the probability of FSD occurrence. Finally, the AI used in this study is freely available, allowing anyone to experiment.

Keywords: Artificial Intelligence; cancer; breast; surgery

EPP1471

Gender differences and defensive coping behavior in patients with inflammatory bowel disorders

N. Chernus[1]*, R. Gorenkov[2], S. .Sivkov[3], S. Sivkova[1], A. Sivkov[3] and T. Savina[1]

[1]Department Of Outpatient Therapy, I.M. Sechenov First Moscow State Medical University: Moscow, Russia, Moscow, Russian Federation; [2]Scientific Substantiation Of Health Preservation Of The Population Of The Russian Federation, The N. A. Semashko National

Research Institute of Public Health, Moscow, Russian Federation and [3]The Department Of Clinical Pharmacology And Internal Diseases Propaedeutics, the I.M. Sechenov First Moscow State Medical University, Moscow, Russian Federation
*Corresponding author.

Introduction: Inflammatory bowel disorders (IBD) are chronic diseases with severe course. In this regard, research aimed at identifying adaptive behavior styles potentially significant for individual resilience to disease-related stress is of particular importance

Objectives: The study population included 45 patients with the inflammatory bowel disorders: 19 male, 26 female (mean age $36,0\pm4,8$), whose clinical and experimental psychological characteristics were studied.

Methods: The following methods were used: 'Life Style Index' by R. Plutchik, H. Kellerman, 'Ways of Coping' by R. Lazarus, S. Folkman.

Results: The experimental psychological study revealed interdependence of psychological defense mechanisms and coping behaviors. Thus, in female patients, such psychological defense mechanisms as 'denial r=-0,51' and 'compensation r=-0,43' showed negative correlation with 'planning problem-solving' coping strategy and positive correlation with such coping strategies, as 'escape - avoidance r=0,38' and 'confrontation r=0,32' p<0,05; in male patients, such psychological defense mechanisms as 'regression r= -0,41;' and 'displacement r= -0,30' demonstrated negative correlation with 'planning problem-solving' and 'exercising self-control', but positive correlation with such coping strategies, as 'escape - avoidance r= 0,34', 'confrontation r= 0,40;', p<0,05. Maladaptive attitude towards disease correlated with avoidance reactions in both male and female patients, which is indicated by the central rank position in disease coping structure of 'confrontation' coping strategy M=69,3$\pm$0,1, along with insufficient utilization of 'planning problem-solving' coping strategy M=39.3$\pm$ 0,1, p< 0,001.

Conclusions: The identified manifestations of psychological maladaptation in both male and female inflammatory bowel disorder patients are moderately pronounced, but require psychotherapeutic correction

Keywords: gender; psychological defense mechanisms; coping behaviors; maladaptation

EPP1472

Mental disorders during pregnancy and postpartum period

I. Kammoun*, R. Kammoun, O. Maatouk, M. Karoui, K. Ben Salah and F. Ellouze

Psychiatry G, RAZI UHC, Tunis, Tunisia
*Corresponding author.

Introduction: Mental disorders of pregnancy or postpartum correspond to all the psychopathological states linked to the period of the pregnancy-puerperium. They are the subject of prevention and screening and are currently a public health priority

Objectives: Describe the socio-demographic characteristics of the patients who presented mental disorders during pregnancy and/or postpartum. Identify the various risk factors predisposing to these disorders

Methods: We carried out a retrospective descriptive analytical study including patients who presented mental disorders during their pregnancy or postpartum and who were hospitalized during the period from January to October 2020.We collected 20 patients.

Results: The average age was 39.84 years. Mental disorders were present in 73.7% during the postpartum period. The patients had a personality disorder in 47.7%. They were smokers in 57% of cases. Pregnancy was desired in 73.7% with regular follow-up in 84.2%. Pregnancy was complicated by toxemia in 22% of cases and gestational diabetes in 27% of cases. Delivery was by caesarean section in 68.4% with primiparity in 50%. According to the DSM5, the psychic disorder most often found during pregnancy was the characterized depressive disorder 43%, and during the postpartum we found the brief psychotic episode 42.1%. The treatment was in half of the cases association between antidepressants and antipsychotics. Mental disorders were significantly correlated with the presence of stressful life events during pregnancy (p =0.02)

Conclusions: Mental disorders during pregnancy and postpartum are frequent and important to detect. Early diagnosis and adequate care are the two essential elements that should allow these women to fully experience their motherhood

Keywords: pregnancy; Postpartum; Mental disorders

EPP1473

Murder she said – a review on mental health issues in intimate relationship violence

A. Delgado*, A. Cortiñas and A. Sousa

Psychiatry, Centro Hospitalar Universitário de São João, Porto, Portugal
*Corresponding author.

Introduction: Violence in intimate relationships is a prevalent worldwide health problem and it is underreported, underrecognized and underadressed by health care professionals.This problem affects women more commonly than men and occurs in heterosexual and same-sex relationships. Violence can include physical, emotional, sexual and financial abuse, as well as control over contraception or pregnancy and medical care and it tends to be repetitive, with an escalation in frequency and severity over time. Abused patients exhibit chronic physical and emotional symptoms and injuries resulting from physical and sexual violence.

Objectives: We conducted a review on violence in intimate relationships and the impact on mental health of the victims.

Methods: Comprehensive search of literature in the medical databases MEDLINE, PsycINFO, SciELO using the keywords: women, violence, intimate relationship violence, mental health, self injury.