Objectives: Our aim was to analyze the psychometric properties of the Portuguese Version of SDE in women during the perinatal period.

Methods: Participants were 346 women with a mean age of 31.68 of years old (± 4.061; range: 18-42). 160 were pregnant (second or third trimester) and 186 were in the post-partum (mean baby´s age=4.37 months (± 2.87; range: 1-12). They answered an online survey including the Portuguese version of the SDE and of the Eating Disorder Examination – Questionnaire (EDE-Q-7).

Results: Confirmatory Factor Analysis showed that the unidimensional model presented good fit indexes in pregnancy (), postpartum () and considering both – perinatal period (χ^2/df=2.0335; RMSEA=.0547, p<.001; CFI=0.9976 TLI=0.9939, GFI=0.9906). The Cronbach's alfa were ≥ 0.65. All the items contributed to the internal consistency and presented high internal validity. Pearson correlations between SDE and EDE-Q-7 total scores were significant (p<.001) positive and high in pregnancy (.639), postpartum (.583) and the perinatal period (.617).

Conclusions: The Portuguese version of SDE has shown good validity (construct and concurrent) and internal consistency. As such, SDE might be a useful tool to screen ED in women during the perinatal period.

Disclosure of Interest: None Declared

EPP0515

Clinical and psychopathological features of parents of patients with anorexia nervosa.

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Introduction: Anorexia nervosa (AN) is a widespread chronic mental disorder with severe negative medical and social consequences. Treating patients with AN is a complex and time-consuming process, as persistent forms are often encountered. The studies' results indicate a possible influence of psychoemotional state and/or existing psychopathological manifestations in parents on AN development.

Objectives: To investigate the clinical and psychopathological characteristics of parents of patients with AN based on the study of emotional regulation, alexithymia, depression, and anxiety.

Methods: The study population (N=110) consisted of fathers (N=47 (42.7%)) and mothers (N=63 (57.3%) of patients with AN. The mean age was M=44.90 (SD=5.9; SE=0.567). All participants completed the emotional regulation scale (DERS), Toronto Alexithymia Scale (TAS-26), Hospital Anxiety and Depression Scale (HADS).

Results: According to DERS: "rejection" - 21.86 (SD=5.675; SE=0.541); "goals" - 19.13 (SD=2.028; SE=0.193); "impulse" - 24.17 (SD=4.908; SE=0.468); "awareness" - 21.93 (SD=1.999; SE=0.191); "strategies" - 30.75 (SD=2.173; SE=0.207); "clarity" - 18.58 (SD=1.486; SE=0.142). The sum was 136.42 (SD=8.119; SE=0.774). The TAS results of the study group were 80.45 (SD=13.699), which characterizes the average personality type as alexithymic. According to HADS, the average values were distributed: the anxiety scale M=7.96 (SD=1.347) the depression scale M=7.95 (SD=1.442). These indicators can be considered as the extreme limit of the norm or subclinically expressed anxiety and depression. The next step was to find statistically significant relationships between the DERS methodology and the HADS and TAS for the study group. According to Spearman's correlation coefficient, there is a direct stable relationship between the variables "anxiety" and "impulse" (r=0.257), awareness (r=0.255), and the total score of emotional regulation according to "DERS" (r=0.246); A direct correlation was found between the indicators "depression" and "rejection" (r=0.151), "goals" (r=0.233), "awareness" (r=0.138); Alexithymia, in turn, has a direct correlation with the "goals" scale and an inverse correlation with the "strategies" scale (r=-0.141)

Conclusions: Parents of patients with AN have various manifestations of psychoemotional disturbances, namely subclinical levels of depression and anxiety, high levels of alexithymia, and emotional regulation problems. The correlation analysis showed that the anxiety score for parents of patients with AN is higher if difficulties with impulse control, emotional awareness, and general emotional regulation are problematic. Depressive tendencies are also associated with the subjects' rejection of emotional reactions and problems with goal-directed behavior. The inverse correlation indicates that the higher the index of alexithymia, the less limited access to emotion regulation strategies, and vice versa.

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Epidemiology and Social Psychiatry

EPP0516

Exploring the associations between involuntary treatment and gender in a portuguese acute psychiatric unit

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Introduction: Involuntary admission rates differ between gender across various countries. In several European Union countries, men are more frequently involuntarily admitted, while an opposite trend, associating women with involuntary care, has been observed in countries like Switzerland, Brazil, and China.

Objectives: Considering the contradictory evidence about gender and involuntary care in the literature, we aim to analyze the gender patterns of involuntary care in Centro Hospitalar Médio Tejo's Psychiatric Acute Unit, exploring the gender differences in diagnosis among involuntary patients.

Methods: We stored and analyzed the data using Microsoft Excel and IBM SPSS Statistics. We studied psychiatry admissions at Centro Hospitalar Médio Tejo, Portugal over 2 years. The Acute Psychiatric Unit, located within a general hospital, has 24 beds, and offers acute mental healthcare services to adults aged 18 and above, serving a coverage area of approximately 251,000 residents. As part of our data collection process for all admissions to the Acute Psychiatry Unit, we recorded information such as gender, age, diagnosis at discharge, treatment type (voluntary or involuntary), and length of stay.