

## EPV1049

### Anime watching in childhood may affect suicidal risk factors in adult life

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**Introduction:** Suicide is one of the leading causes of death worldwide being the fourth major cause of death among young people 15-29 years old. The reduction of suicide mortality is prioritized by the World Health Organization (WHO, 2019). There is a number of internal and external factors associated with suicidality (Soto-Sanz V et al., 2019; Farbstein et al., 2022.). Special attention is paid to the influence of the social media on suicidality (Cheng A. T. A. et al., 2007; Niederkrotenthaler T. et al., 2020; Sedgwick R. et al., 2019). In the Russian Federation, anime, an animation genre and a media cultural phenomenon, is increasingly popular among young people. Characters who are lonely and lost their meaning of life are common in anime. Romanticization and idealization of such characters may lead to increased attractiveness of death and thus have a negative effect on the mental health of adolescents and young adults due to their incomplete identity development (Liu Y. et al., 2022; Backer, H. A., 2023).

**Objectives:** We aimed to study the influence of the anime on the presence of suicidality and depression in adolescents and young adults in the Russian Federation.

**Methods:** We interviewed 304 people living in the Russian Federation and watching anime on the regular basis (244 women, mean age 20.9 ± 3.8 years, range 13-36 years). We collected sociodemographic data and age when a person had started watching anime. We performed Reasons for Living Inventory, RFL (M. Linehan et al., 1983), Beck Depression Inventory, BDI (Aaron Beck, 1961). We divided all participants into three groups according to their age: adolescents (13-19 years), young people (20-24 years), adults (25-36 years). In each group, we compared BDI: level of depressive symptoms, cognitive-affective subscale, subscale of somatic manifestations of depression; RFL scales: Survival coping beliefs, responsibility to family, child related concerns, fear of suicide, fear of social disapproval, moral objections between three subgroups based on the age of the anime watching start (<12 years old, 12-15 years old, ≥16 years old) using Kruskal-Wallis test and post hoc Mann-Whitney U-test for pair comparisons with Bonferroni correction for multiple comparisons. Level of significance p<0.05.

**Results:** In the adolescents (n=130), we did not find any differences between the three subgroups. In the young people (n=127), participants who had started watching anime in childhood (<12 years old) had higher level of depression (p= 0,014) and higher level of cognitive-affective symptoms (p= 0,006). In the adults (n=47), participants who had started watching anime in childhood had decreased moral attitudes contrary to suicide (p= 0,004). Other scales not found to differ significantly.

**Conclusions:** Start of the anime watching in childhood (<12 years old) was associated with increased suicidal risk factors and decreased anti-suicidal factors in the young adults.

**Disclosure of Interest:** None Declared

## EPV1048

### The Impact of Patient Suicide on Adult and Child Psychiatry Residents in Tunisia

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**Introduction:** Adult and child psychiatry residents encounter unique stressors in their training distinct from those in other medical specialties. Patient suicide has been identified as one of the most distressing experiences during psychiatric training.

**Objectives:** This study represents the first Tunisian investigation aiming to assess (1) the impact of patient suicide on psychiatry residents and (2) the limitations of the institutional support system in dealing with such cases.

**Methods:** A Google Forms questionnaire was distributed via email to all residents, gathering socio-demographic data, assessing traumatic impact using the PTSD Checklist for DSM-5 (PCL-5), and soliciting open-ended responses regarding personal experiences and expectations of the institutional support system.

**Results:** Fifty-three residents participated in the study. Among them, 29 residents had encountered patient suicide, with 12 directly involved. Symptoms of PTSD were detected in three residents. The physician directly involved in treating the suicidal patient reported the highest PCL-5 score. The majority of residents (27 out of 29) expressed the need for a structured support and training program tailored to healthcare professionals dealing with suicide.

**Conclusions:** The findings suggest that psychiatric residents may require additional training and support to effectively address the complex issue of patient suicide. Implementing specific training programs could significantly enhance their ability to manage such situations.

**Disclosure of Interest:** None Declared

## EPV1049

### Prevalence of suicidal behavior in bipolar type I patients

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**Introduction:** The prevalence of suicidal behavior in individuals diagnosed with Bipolar Disorder Type 1 is a topic of great concern within the field of psychiatry and mental health research. Bipolar

Disorder Type 1 is characterized by extreme mood fluctuations that can contribute to a heightened risk of suicidal ideation, attempts, and completions in affected individuals.

#### Objectives:

- To examine the socio-demographic and clinical profiles of Bipolar Type 1 patients admitted to the “C” psychiatry department at Hedi Chaker Hospital in Sfax, Tunisia.
- To identify and understand the factors associated with suicidal behavior in this population.

**Methods:** We conducted a retrospective descriptive and analytic study of hospitalized patients suffering from bipolar disorder type 1 in the psychiatry department “C”, Hedi Chaker Hospital, Sfax Tunisia from 2021 to 2023. Socioeconomic data and clinical profiles of patients were collected from archived files.

**Results:** The total number of patients was 98, with an average age of  $36.74 \pm 12.3$  years. The majority were single (67%), living with their families (76.5%), jobless (45.9%), and receiving family support (94.9%). In terms of psychoactive substance use, 81.6% have used tobacco, 46.9% have used alcohol, and 34.7% have used cannabis. Concerning family history, 55% of patients had at least one family member being treated for a mood disorder. Among them, 7.1% had attempted suicide, and 6.1% had died by suicide.

Concerning the clinical profile of the study population, 28.6% had a personal somatic history. The diagnosis of bipolar disorder was made at the age of  $27.52 \pm 8.6$  years. 11.2% had a comorbid personality disorder with bipolar disorder.

The majority of patients were on antipsychotics (95.9%), 84.7% were using mood stabilizers, 33.7% were prescribed anxiolytics, and only 4.1% were on antidepressants. Treatment compliance was poor in 61.2% of cases and 63.3% of patients had a poor insight.

Ten percent of these patients had attempted suicide, 50% during a depressive episode, 50% occurring during a depressive episode, 30% during a manic episode, and 40% of attempts were related to discontinuation of treatment. 3.1% had used hanging, and 3.1% had engaged in voluntary drug ingestion as a method of self-harm. None of the suicide attempts necessitated intensive care hospitalization, but 60% of the individuals were admitted to psychiatric care. There was a statistically significant correlation between suicide attempts and a family history of suicide ( $p=0.049$ ).

**Conclusions:** Bipolar patients face a heightened risk of suicide, which is closely tied to the distinctive attributes of the disorder, including biological factors, thymic decompensation, and psychological aspects. Consequently, managing their condition necessitates a tailored approach, demanding ongoing vigilance for individuals diagnosed with bipolar disorder.

**Disclosure of Interest:** None Declared

## EPV1050

### Can high-sensitivity C-reactive protein be a routine trans-diagnostic biomarker for thoughts of death and suicidal attempts?

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**Introduction:** Several studies have shown an association between suicidal behavior and increased C-reactive-protein (CRP) levels (Ghayour-Mobarhan M. *et al.* Comb Chem High Throughput Screen 2022; 25 1047-1057) although most studies evaluated the association between CRP levels and suicidal ideation in depressed patients (Olié E. *et al.* Eur Neuropsychopharmacol 2015; 25 1824-31).

**Objectives:** Our study assessed baseline high-sensitivity CRP (hsCRP) levels in a cohort of adult inpatients affected by severe mental illness (SMI) and their association with Mini-International Neuropsychiatric Interview-5 subscale suicidality (MINI-5-s).

**Methods:** A naturalistic, observational, cross-sectional study was carried out by retrospectively recruiting 127 adult SMI inpatients, excluding patients with an organic pathology. HsCRP levels were assessed at the ward admission. To assess the suicidal behaviour all patients filled the same day the MINI-5-s.

**Results:** The number of patients with  $hsCRP > 3mg/l$  were significantly higher among those with thoughts of death ( $p=0.002$ ) and suicidal attempt ( $p=0.026$ ). No statistically significant associations were observed between hsCRP levels and other suicidality dimensions. Limitations: Small sample size, heterogeneous diagnoses, lack of diagnostic sub-analysis, cross-sectional design, and lack of a healthy control group.

**Conclusions:** The study reveals a transdiagnostic association between inflammation, thoughts of death and suicidal attempt in SMI inpatients. Our preliminary findings could support a routine introduction of hsCRP measurement, due to its relatively low cost, possible utility in trans-diagnostically suicide risk assessment. Large-scale clinical trials would be recommended to evaluate the effects of early anti-inflammatory therapy in patients with death ideation and/or suicidal attempt and concomitant low-grade hsCRP elevation. HsCRP could potentially represent an early biomarker for suicidal risk.

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## EPV1051

### Descriptive study of suicidal behavior in adult population attended in an emergency department during a one-year period and comparative study with the following annual period

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**Introduction:** Suicide is the most frequent psychiatric emergency. About 1% of all deaths are due to suicide so around 700,000 people commit suicide each year. Suicide attempt is more frequent in women (3:1) while completed suicide is more frequent in men (4:1). Most suicides occur in the 35-64 age range. The severity of a suicide attempt is assessed in terms of method, potential lethality, rescuability and impulsivity. A previous suicide attempt is the main risk factor for suicide behavior. The majority (more than 90%) of