Objectives: The present review would like to focus on any existing correlations between NLR and suicidal risk in patients with mood disorders.

Methods: We sourced articles on the topic found in major scientific literature databases, combining the keywords "neutrophil/lymphocyte ratio", "NLR", "mood disorders", "major depressive disorder", "bipolar disorder" and "suicide risk".

Results: There are congruent findings of significantly higher NLR values in depressed patients attempting suicide than in depressed patients with no suicidal behaviors or healthy controls. In addition, violent means appear typical in this subgroup of depressed suicidal patients, suggesting that patients with higher levels of NLR are at risk of attempting suicide and to be successful in self-harming. Similar results have been found in patients with bipolar disorder, showing a positive correlation between NRL and suicide risk, evaluated by the Suicide Behaviors Questionnaire-Revised (SBQ-R). Moreover, in patients with a positive family history for suicide attempts, NRL was found to be a significant positive predictor of suicide risk.

Conclusions: These findings, although limited, support the notion that NLR might be a useful marker for suicide vulnerability in both BD and MDD patients.

Disclosure: No significant relationships.

Keywords: Mood disorders; neutrophil/lymphocyte ratio; suicide risk; NLR

EPV1580

Sequences for reporting on mild and serious types of suicidal behaviours: A population-based study in Latvia in 2010-2018

K. Mieze[1]*, A. Kivite-Urtane[2], D. Grinberga[3], B. Velika[3], I. Pudule[3] and E. Rancans[4]

[1]Riga Stradins University, Department Of Doctoral Studies, Riga, Latvia; [2]Riga Stradins University, Department Of Public Health And Epidemiology, Riga, Latvia; [3]Centre for Disease Prevention and Control of Latvia, Department Of Research And Health Statistics, Riga, Latvia and [4]Riga Stradins University, Department Of Psychiatry And Narcology, Riga, Latvia
*Corresponding author.
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Introduction: Latvia is listed as a country with one of the highest suicide mortality rates in European Union (National Statistical System of Latvia, 2021).

Objectives: To assess the sequences for reporting of suicidal behaviours (SB) in Latvian general population.

Methods: The study is based on secondary data of the Health Behaviour Among Latvian Adult Population survey, provided by the Centre for Disease Prevention and Control of Latvia (representative sample of the Latvian population aged 15-64 in 2010, 2012, 2014; 15-74 in 2016, 2018; (n=16,105). Respondents were asked to report the occurrence of life-weariness (LW), death wishes (DW), suicidal ideation (SI), suicidal plans (SP), suicide attempts (SA) during the previous year.

Results: Statistically significant differences between genders were found for LW (X^2=17.118; df=1; p<0.001; AR=±4.1), DW (X^2=17.764; df=1; p<0.001; AR=±3.8) and any type of SB (X^2=15.721; df=1; p<0.001; AR=±3.8). Frequencies of individual sequences of reporting last year SB are presented in Table.

Sequences for reporting on SB in 2010-2018		
	N	%
Continious		
LW	885	35.3
LW+DW	746	29.7
LW+DW+SI	255	10.2
LW+DW+SI+SP	300	12.0
LW+DW+SI+SP+SA	51	2.0
Continious not complete		
DW	146	5.8
DW+SI	13	0.5
Non-continious		
LW+DW+SI+SA	0	0.0
LW+DW+SP	13	0.5
LW+SI	44	1.8
LW+SI+SP	7	0.3
LW+SI+SP+SA	1	0.0
LW+SP	8	0.3
DW+SI+SA	0	0.0
DW+SP	0	0.0
SI	16	0.6
SI+SA	0	0.0
SI+SP	3	0.1
SP	13	0.5
Other	9	0.4
Total	2510	100

Conclusions: Further research is warranted to identify vulnerable groups in the Latvian general population in relation to suicidality and thus to develop targeted preventive measures.

Keywords: Suicide; suicide prevention; suicidal behaviour; public health

EPV1581

Sudden Death of Mental Health Service Users During a Pandemic; a follow up study of consecutive unexpected deaths during the current pandemic compared to a previous consecutive cohort of persons who took their own lives

C. Haley* and R. Mcdaid

Donegal Mental Health Services, Letterkenny University Hospital, Dept Of Psychiatry, XDC, Ireland
*Corresponding author.
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Introduction: The Covid pandemic has mental health consequences. This study examined service user suicides for thirteen months during the pandemic and "lock down" restrictions in Ireland .It compares variables from this group with a previous 2016 study examining service user suicides conducted in Ireland. Despite a previous trend of improving suicide there was an increase in people who were involved with mental health services completing suicide during the pandemic.

Objectives: To hypothesize that social disequilibrium caused by the Covid pandemic and its control measures may remove the benefit of protective factors in suicide.

Methods: The 2016 study used the Suicide Support and Information System- Psychological Autopsy Model as its methodology.The Rosenberg criteria were used to make a determination of suicide. This 2021 study used an anonymous clinical record review to repeat some key variables identified in the SSIS-PAM work. Statiscal comparisons were made.

Results: The pandemic group had a different pattern of suicide with low levels of significance between four variables. The majority were female, in a relationship, had jobs, no history of self-harm, no family history of mental illness, less addiction problems and in-patient care. Like the 2016 group they did have diagnoses of mental illness, were in regular contact with services and were prescribed medication. Their suicides were predominantly hanging and drowning.

Conclusions: During the pandemic suicide increased. Protective factors such as relationships and employment were increased in pandemic suicides who also had less vulnerability factors such as addiction problems and self-harm. "Real time" suicide data collection such as a suicide observatory model might identify more significant trends.

Disclosure: No significant relationships.
Keywords: covid; Suicide; service user

EPV1582

Family history of mood disorder weakens the association between personality traits and suicidality in depressed patients

A. Kibitov[1]*, A. Nikolishin[2], N. Neznanov[3], G. Mazo[4] and A. Kibitov[5]

[1]Bekhterev National Medical Research Center for Psychiatry and Neurology, Translational Psychiatry Department, Saint-Petersburg, Russian Federation; [2]Federal State Budgetary Istitution Serbsky National Medical Research Centre for Psychiatry and Narcology of Ministry of Heath of the Russian Federation, Laboratory Of Molecular Genetics, Moscow, Russian Federation; [3]Bekhterev National Medical Center for Psychiatry and Neurology, Geriatric Psychiatry, Saint-Petersburg, Russian Federation; [4]Bekhterev National Medical Research Center for Psychiatry and Neurology, Translational Psychiatry Deartment, Saint-Petersburg, Russian Federation and [5]Serbsky National Medical Research Center on Psychiatry and Addictions, Molecular Genetics Laboratory, Moscow, Russian Federation
*Corresponding author.
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Introduction: Depression is associated with a high risk of suicidal thoughts (ST) and behaviour (SB). Suicidality and depression have partially shared genetic underpinnings and family history of mood disorders (FH) can reflect genetic impact on specific features of depression. Thus, in depressed patients, FH may affect suicidality and its associations with other risk factors, such as personality traits.

Objectives: We conducted a cross-sectional study to test the impact of FH on the association between suicidality and personality traits in depressed patients.

Methods: 200 depression in- and outpatients (64% (n=128) women, mean age (M(SD):36,21(15,09)) were enrolled. 28% (n=56) reported FH ("FH+" cohort), other patients comprised the "FH-" cohort. Columbia-Suicide Severity Rating Scale (C-SSRS) was used to assess ST and SB during the most suicidal period of life. Personality traits were assessed by Cloninger Temperament and Character Inventory (TCI-125). Information about FH and history of suicide attempts (SA) was obtained during the clinical interview.

Results: Personality traits and suicidality characteristics (ST, SB, SA) did not differ between FH+ and FH- patients. In FH+, no differences in TCI-125 scores between suicide attempters and non-attempters were found, while in FH-, attempters had higher scores of TCI-125 "Novelty seeking" (p=0.002) and "Self-transcendence" (p=0.031) subscales. Multiple correlations between ST, SB and TCI-125 subscales were found only in FH-, In FH+, only one correlation (between ST and TCI-125 "Persistence" subscale (r=-0.288, p=0.038) was found.

Conclusions: Our results showed a weakened association between personality traits and suicidality in depressed patients with FH of mood disorders, although more data on larger samples are needed.

Keywords: Suicide; Depression; Family history

EPV1583

Suicide prevention actions carried out by an academic psychiatry service in Rio de janeiro city

J. Jaber

Clínica Jorge Jaber, Saúde Mental, Rio de Janeiro, Brazil
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Introduction: Description of a structured work of primary prevention, based on a survey of the prevalence of suicidal behavior in the Brazilian population throughout life, performed by an academic service of psychiatry and chemical dependence. We describe a survey of the probability of suicide attempt in an academic internment service focused on psychiatry and drug addiction in the city of Rio de Janeiro.

Objectives: Raise awareness of the need to call for help and 24-hour distress hotline phone outreach. Calculate a possible demand for mental health services to patients with severe suicidal behavior aiming at the necessary equipment to attend this population.

Methods: Clarification actions through the press, development of a suicide prevention lecture program given in schools, surveillance cameras, military institutions, companies and laws, promotion of public events with music, activities, distribution of t-shirts, booklets and leaflets.Using the mental health care implementation system: identifying the patient, raising their needs and available resources, breaking resistance, advocating and treating, we raised in this institution that from January 01, 2019 to September 01, 2019, 137 patients were hospitalized with a serious suicide attempt.

Results: According to a survey of the prevalence of suicidal behavior in the Brazilian population over the course of life, where out of 100 patients, 17 had suicidal thoughts, 5 planned, 3 attempted suicide and 1 was treated in the emergency room.