

interoceptive awareness (SAQ), Thwarted Belongingness (TB, INQ subscale), loneliness (UCLA) and low perceived social support (MSPSS) were associated with both current SI and history of SP/SA. Concerning regression models, TB (INQ) increased the likelihood of SI while Survival and Coping Beliefs (RFL subscale) reduced it. The model explained 49% of the variance of SI by correctly predicting 88.7% of SI cases. Perceived social support (MSPSS) reduced the likelihood of current SP/SA levels while interoceptive awareness (SAQ) increased it. This model explained 40% of the variance of SP/SA by correctly predicting 82.5% of suicide risk cases.

**Conclusions:** We have identified risk and protective factors for suicide, consistent with the IPTS, which can orient the prevention, evaluation and clinical treatment of residents.

**Disclosure of Interest:** None Declared

## EPP0773

### Suicide rate variation in Río Salaquí indigenous reservation among 1999 y 2019: a poblacional study

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**Introduction:** Suicide, was defined as the act of intentionally taking one's own life, understanding the lethal consequences of the act committed. The global suicide rate is 10.5 cases per 100,000 inhabitants, being lower in America, where it reaches values of 7.3 deaths per 100,000 inhabitants.

The Embera ethnic group is a Latin American indigenous people, of Chocó ethnolinguistic origin, which is located in the countries of Panama, Colombia and Ecuador; Particularly within the Embera ethnic group, a phenomenon of suicide in waves has been documented in journalistic media, which has been called "The Epidemic of the ropes".

The data was collected in 2020, within the Río Salaquí-Isletas indigenous reservation (Riosucio-Chocó), in which multiple cases of suicide have occurred in the new millennium, without knowledge of previous cases.

**Objectives:** To calculate the suicide rate and its trend over time in the Río Salaquí indigenous reservation, among 1999 and 2019 and compare the suicide rate and its trend with official data from Colombia, determining differences between the two.

**Methods:** A descriptive study with an analytical component will be carried out. The data was collected in 2020, within the Río Salaquí-Isletas indigenous reservation (Riosucio-Chocó-Colombia). The information was taken from no structured interviews conducted with individuals from the community.

The validation of the cases and the selection of duplicate cases was carried out through checklists created by the researchers. When calculating the specific suicide rates, the estimated population in the community is obtained from official censuses and local authorities. Statistical analysis to determine whether the suicide rate; It was carried out with the SPSS program, using a confidence interval on the rate, which would allow estimating its variability with 95% reliability.

**Results:** Data of deaths by suicide were collected in people of any age, residents of the Río Salaquí Indigenous Reservation (Isletas),

between the decade of 1999 and 2019, as well as the total population of the community for the calculation of suicide rates. suicide.

Among the 10 years evaluated, 22 deaths by suicide were found, of which 13 (59%) corresponded to men and 9 (41%) to women. The suicide rate in Río Salaquí for this decade was 88.8 cases per 100,000 inhabitants 95% CI (68.7-375.8), with peaks in some three-year periods analyzed and no deaths by suicide before 2001. On the other hand, the The national suicide rate in Colombia for this decade was 4.56 cases per 100,000 inhabitants 95% CI (4.18-4.87).

**Image:**

**Tabla 1**

*Tasa de suicidio en resguardo indígena Río Salaquí*

Años	Número de casos	Población	Tasa de suicidio
1999	0	1059	0 casos por 100.000 habitantes
2000	0	1070	61,6 casos por 100.000 habitantes
2001	2	1081	92,5 casos por 100.000 habitantes
2002	1	1092	121,7 casos por 100.000 habitantes
2003	1	1104	56,7 casos por 100.000 habitantes
2004	0	1116	29,5 casos por 100.000 habitantes
2005	0	1128	29,2 casos por 100.000 habitantes
2006	1	1140	28,9 casos por 100.000 habitantes
2007	0	1152	57,2 casos por 100.000 habitantes
2008	1	1164	142,6 casos por 100.000 habitantes
2009	4	1176	170 casos por 100.000 habitantes
2010	1	1188	139 casos por 100.000 habitantes
2011	0	1200	27,5 casos por 100.000 habitantes
2012	0	1212	0 casos por 100.000 habitantes
2013	0	1224	53,9 casos por 100.000 habitantes
2014	2	1237	53,3 casos por 100.000 habitantes
2015	0	1250	80 casos por 100.000 habitantes
2016	1	1263	26,1 casos por 100.000 habitantes
2017	0	1275	182,7 casos por 100.000 habitantes
2018	6	1285	207 casos por 100.000 habitantes
2019	2	1349	222 casos por 100.000 habitantes

*Nota.* Esta tabla muestra la tasa de suicidios que se presentan en el resguardo Indígena del Río Salaquí, de los años 1999 hasta el 2019, teniendo en cuenta, años, número de casos, población y la tasa de suicidio.

## Image 2:

**Tabla 2**

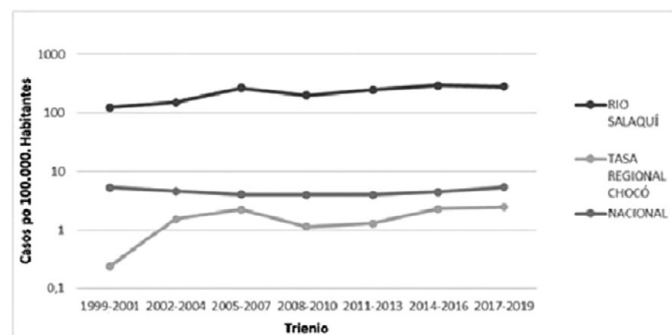
*Tasa de suicidio por trienios en resguardo indígena Río Salaquí*

Años	Número de casos	Promedio móvil	Población	Tasa de suicidios	IC 95%
1999-2001	2	4	3210	124 casos por 100.000 habitantes	(2-246)
2002-2004	2	5	3312	150 casos por 100.000 habitantes	(18-283)
2005-2007	1	9	3420	263 casos por 100.000 habitantes	(91-435)
2008-2010	6	7	3528	198 casos por 100.000 habitantes	(51-345)
2011-2013	0	9	3636	247 casos por 100.000 habitantes	(85-409)
2014-2016	3	11	3750	293 casos por 100.000 habitantes	(119-466)
2017-2019	8	11	3909	281 casos por 100.000 habitantes	(115-447)

*Nota.* En esta tabla muestra la tasa de suicidios que se presentan en el resguardo Indígena del Río Salaquí en trienios, de los años 1999 hasta el 2019, teniendo en cuenta, años, número de casos, promedio móvil, tasa de suicidios intervalo de confianza.

**Image 3:****Figura 1.**

Comparación de las tasas de suicidio por trienio



Nota. El gráfico representa la comparación de tasas de suicidio por trienio, entre las tasas de Río Salagüí, tasa regional del Chocó y las tasas de suicidio Nacional, desde 1999 al año 2019.

**Conclusions:** During the development of the study is evident that in the indigenous reservation in the Salagüí river the suicide rate is significantly higher than in the national rates, it is even higher than the worldwide rate of suicide since the year 2001.

**Disclosure of Interest:** None Declared

**EPP0774**

### Electrophysiological changes between patients with suicidal ideation and suicide attempts: An event-related potential study

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**Introduction:** Suicide is recognized as a social problem and the interest in preventive measures to diminish suicide risk is constantly increasing. But scientific research results that distinguish between those who have only suicidal ideation (SI) and those who have a history of Suicidal attempts (SA) are limited. Inhibitory control is regarded as an important ability related to the transition from suicidal ideation to suicide attempts. In event-related potential, patients with dysfunction of inhibitory control demonstrate a reduction in the no-go amplitude.

**Objectives:** This study aimed to determine the association between the no-go event-related potential component and suicidal behaviors among suicide attempters and ideators who never attempted suicide.

**Methods:** Overall, 150 patients who visited the emergency room by suicide attempts or patients who visited the psychiatric department with suicidal ideation were recruited and instructed to perform a go/no-go task during electroencephalography recording. The Beck Depression Inventory, Beck Anxiety Inventory, Barratt Impulsivity Scale, Difficulties in Emotional Regulation Scale, and Acquired Capability for Suicide Scale were used. Individuals were divided into two groups: those with suicidal attempts (SA group) and with suicidal ideation (SI group) without SA. The psychological characteristics and event-related potentials of the two groups were compared. Correlation analyses were conducted to test the association between the clinical characteristics and event-related potentials.

**Results:** The SA group had significantly decreased no-go P3 amplitudes at all electrodes compared to the SI group. In the correlation analysis between the clinical measurements and event-related potentials in all the participants, no-go P3 amplitudes in whole electrode sites were negatively correlated with the scores of the acquired capability for the suicide scale.

**Conclusions:** This study revealed that suicide attempters have dysfunction in controlling inhibition compared to suicide ideators reflected in the no-go P3. Our findings suggested that no-go P3 can be a biomarker associated suicide attempts in suicide ideators.

**Disclosure of Interest:** None Declared

**EPP0776**

### Managing the risk of suicide in a psychiatry clinic: an ethnographic study on the work atmosphere of nurses during the pandemic period

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**Introduction:** It is known that the restrictions and clinical changes experienced during the pandemic period have negative effects on the care and treatment of psychiatric patients. However, insights on how the pandemic environment and the approaches of healthcare professionals serving during the pandemic affect the care and treatment of patients at risk of suicide are insufficient.

**Objectives:** This ethnographic study aimed to identify the approaches of psychiatric nurses in managing suicide risk during the pandemic period in relation with their work environment.

**Methods:** This ethnographic research design used a sample of 13 psychiatric nurses in a psychiatric clinic in Ankara. Data were collected with in-depth interviews, participant observations and observant participations. Data were obtained from a total of 612 hours of observation and 13 planned nurse interviews. Data were analyzed using qualitative thematic analysis.

**Results:** The emergent main theme from data analysis is explained under the title of “The risk of loss of inauthenticity in suicide risk management”. “Risk of loss of inauthenticity” means the fact that the individual suicidal risk factors and differences of the patients cannot be perceived/assessed by the nurses.

**Conclusions:** Supposing all patients having the same suicide risk level by psychiatric nurses caused insensitivity to risky patients in the care process. Nurses’ inadequate approach to patient personality disorder and limited social interactions due to the pandemic atmosphere made it difficult for nurses to have knowledge and understanding of how patients cope with suicidal ideations. These findings show the importance of the use of valid and reliable scales with risk formulations and the significance of triage in crisis periods such as current pandemic. In addition, creating available online consultancy service alternatives may have an important role in the management of suicide risk for patients who are disturbed by long-term hospitalization. Also these findings may contribute to the creation of qualified care and treatment guidelines on suicide risk management for crisis periods.

**Disclosure of Interest:** None Declared