

Headaches, shoulder pains, and upper back pain also decreased. Patients reported high levels of benefit from the acupuncture and encouraged other patients to continue to come and try the acupuncture. Usually, the needles could be placed within the first third of the group.

**Conclusions:** Acupuncture improved anxiety ratings for people in group psychotherapy for anxiety over group alone, though the possibility of a placebo effect cannot be eliminated. Patients chose acupuncture, which could also present a potential bias.

**Disclosure of Interest:** None Declared

### O0003

#### Using Virtual Reality Assisted Therapy to Reduce Cognitive Test Anxiety and Dysfunctional Metacognitions

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doi: 10.1192/j.eurpsy.2024.884

**Introduction:** Cognitive test anxiety and dysfunctional metacognitions can significantly impact an individual's performance and overall mental health. However, the effectiveness of various treatment strategies, including Virtual Reality (VR) therapy, is yet to be fully explored.

**Objectives:** This study aimed to examine the effectiveness of VR therapy in reducing cognitive test anxiety and dysfunctional metacognitions in adults.

**Methods:** A total of 64 participants were enrolled in the study, with 40 in the treatment group and 24 in the control group. Data were collected using the Metacognition Questionnaire-30, Cognitive Test Anxiety Scale, and a sociodemographic questionnaire. Paired samples t-tests were used to compare pretest and posttest scores, while independent samples t-tests were used to compare the means between the groups.

**Results:** The findings suggest that the treatment group experienced a significant reduction in cognitive test anxiety and negative metacognition scores following VR therapy. No significant changes were observed in the control group, and there were no significant differences in pretest scores between the treatment and control groups.

**Conclusions:** The study indicates that VR therapy may be an effective treatment strategy for reducing cognitive test anxiety and dysfunctional metacognitions. Further research is recommended to validate these findings and explore the potential of VR therapy in treating other psychological disorders.

**Disclosure of Interest:** None Declared

### EPP0553

#### Perfectionism, self-efficacy and mindfulness as predictors of test anxiety among university students

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doi: 10.1192/j.eurpsy.2024.885

**Introduction:** Test anxiety includes subjective experience of intense physiological, cognitive and/or behavioral symptoms

during test-taking situations such as pacing, headaches, excessive feelings of fear, anger, troubles concentrating, sudden forgetfulness and negative self-talk. Especially students who are striving for flawlessness, have overly critical self-evaluations and beliefs that other expect perfection are sensitive to experiencing these feelings. On the contrary, individuals who believe in their ability, are present in the moment and are open to experiences tend to be more resilient to stressors and anxiety symptoms.

**Objectives:** The aim of this study was to investigate perfectionism, self-efficacy, and mindfulness as predictors of test-anxiety among undergraduate and postgraduate students of different study fields.

**Methods:** 525 undergraduate and postgraduate students from the fields of Natural, Medical Sciences and Engineering, Social Sciences, Humanities and Art, and Economics, Business and Administration Studies participated in the study. A sociodemographic form, the Test Anxiety Inventory (TAI), 15-Item Five Facet Mindfulness Questionnaire (FFMQ-15), Scale of General Self-efficacy (GSES) and Frost Multidimensional Perfectionism Scale-Brief (FMPS-Brief) were used. Descriptive statistics were used to show the sociodemographics of our sample, while correlational analyses were performed to assess the associations between the variables. To further validate the findings, multiple linear regression analyses were performed.

**Results:** Higher perfectionistic evaluative concerns and lower self-efficacy showed associations with test-anxiety and were proven as predictors among undergraduate and postgraduate students. In addition, being younger and female in postgraduates, and having perfectionistic strivings and being Mindful-Observe in undergraduate students proved to be significant predictors of test-anxiety.

**Conclusions:** The found associations of perfectionism and self-efficacy, as well as its predictor roles further validate the information we have in literature, but widen the sample to postgraduate students and various study fields which help us generalize the findings more. What adds the most value in theoretical and practical aspects is the findings associated with mindfulness. Mindfulness techniques are very popular intervention methods for anxiety related symptoms, and the positive relationship of Mindful-Observe with test anxiety opens new viewpoints to mindfulness-based interventions. Particularly focusing on Mindful-Observe while treating test-anxiety may yield better outcomes in alleviation of symptoms.

**Disclosure of Interest:** None Declared

## Bipolar Disorders

### EPV0093

#### Lithium withdrawal and relapse in bipolar disorder when kidney function deteriorates

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doi: 10.1192/j.eurpsy.2024.886

**Introduction:** Lithium was the first mood stabilizer and today continues to be a first-line treatment in the treatment of bipolar disorder despite its adverse effects, which make it important to monitor blood levels and control kidney function.

**Objectives:** Presentation of a case of lithium withdrawal and relapse in bipolar disorder. Literature review relating to the risk of relapse when lithium treatment is interrupted.

**Methods:** We present a clinical case of a patient who suffers a deterioration in renal function that requires the withdrawal of lithium and who consequently suffers a relapse. We conducted a bibliographic research of articles in Pubmed on this topic.

**Results:** A 49-year-old male, with a history of multiple admissions to UHB since the age of 18 with a diagnosis of bipolar disorder and treatment with lithium. Decompensations towards the manic pole have always been related to interruptions in lithium treatment. On several occasions when the patient was feeling well emotionally, he believed himself to be "cured" and abandoned the treatment, triggering a manic episode, showing verbal aggression, increased self-esteem and delusional ideation of harm. Remission was usually achieved with the reintroduction of lithium and the addition of high-dose quetiapine. Between episodes, constant overvalued ideas of economic scarcity seemed to persist, which were accentuated in the form of delusional ideas of ruin in depressive decompensations. After 7 years of stability, control analysis showed blood litemia of 2.2 mEq/L with deterioration of kidney function and generalized tremor was observed, without improvement after serum therapy. He was admitted for dialysis and lithium was suspended. Treatment with valproate was started and a consultation scheduled in a week to adjust the dose. The patient did not attend that consultation and was admitted three days later to Psychiatry Hospitalization showing a challenging attitude, evident dysphoric mood, accelerated speech, with derailments and echolalia. Delusional ideation of harm with auditory hallucinations. Insomnia and hyporexia. Chronic renal failure persisted.

**Conclusions:** Lithium is a very effective drug but with a narrow therapeutic range that requires adequate monitoring due to the possible consequences of its use at different organs and systems of the body. when lithium is found in the blood at toxic levels with deterioration of kidney function and glomerular filtration fails to recover, lithium treatment should be suspended. Sudden withdrawal of lithium significantly increases the risk of relapse due to rebound effect. More than 50% of patients experience a recurrence within 10 weeks of withdrawal.

**Disclosure of Interest:** None Declared

## EPV0094

### Factors influencing stigma in bipolar disorder type I

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doi: 10.1192/j.eurpsy.2024.887

**Introduction:** Given the recurrence of mood episodes, with their negative repercussions such as high suicidal risk, significant cognitive decline and the persistence of residual signs with a negative impact on the patient's family, social and professional functioning,

Bipolar Disorder is a mental disorder with a significant social stigma.

**Objectives:** Identify the socio-demographic and clinical factors that may influence the experience of stigma in bipolar disorder type I

**Methods:** We conducted a cross-sectional, comparative study over a six-month period at the aftercare unit of Razi Hospital's psychiatric ward "A", including patients treated for TB I according to DSM 5 criteria and stable on treatment.

The study was conducted in two stages: first, sociodemographic and clinical characteristics were collected using a pre-established form. The DISCUS scale, validated in Arabic, was then administered.

**Results:** We included 100 patients (60 men and 40 women) with a mean age of 43.55 years.

The median DISCUS stigma score was 6 (0-19).

The mean value of the DISCUS scale was high for patients of urban origin ( $p=0.042$ ), with a low socioeconomic level ( $p=0.001$ ), and poor family dynamics ( $p<0.001$ ).

The presence of a comorbid personality disorder was significantly associated with stigma ( $p=0.006$ ). The DISCUS scale was positively associated with the number of years of follow-up, the number of hospitalizations, the number of manic episodes, the number of depressive episodes and the number of episodes with psychotic or melancholic features.

**Conclusions:** This stigma can have a negative impact on patients' quality of life in a whole range of ways, including limiting their opportunities for education, employment and housing.

Intensive therapeutic interventions should be considered for vulnerable patients to limit the consequences.

**Disclosure of Interest:** None Declared

## EPV0097

### The Dilemma of Lithium Discontinuation in Bipolar Disorder During Pregnancy Planning: A Case Report and Literature Review

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doi: 10.1192/j.eurpsy.2024.888

**Introduction:** Lithium is considered the gold standard mood stabiliser for bipolar disorder, yet its use during pregnancy remains controversial, demanding careful consideration of potential risks and benefits. Classically, it has been associated with an increased risk in congenital heart defects, however, recent studies point towards a much lower absolute risk than was previously believed. Furthermore, discontinuation of lithium before or during pregnancy poses a high risk of destabilisation and lithium has been shown to reduce the risk of relapse both in pregnancy and in the postpartum period. Hence, treatment planning is of the utmost importance in this patient group and individual risk stratification should be undertaken for patients to make informed decisions about their treatment.

**Objectives:** To describe the case of a patient with bipolar disorder who discontinued lithium treatment while attempting to conceive and subsequently presented with a manic episode and to expand the scientific knowledge on this topic.