

and decreased RSFC in Septal - Cerebellum_Crus1_R compared to MDD without insomnia. All regions with significant results were significantly correlated with insomnia severity.

Conclusions: Since the RSFC of all pairs of regions that showed significant differences between the two groups in this study were significantly correlated with insomnia severity (i.e., ISI score), the association of these regions with insomnia in MDD is supported. The significance of this study is that there have been studies that have examined the RSFC in fMRI for insomnia, but there are few studies on MDD with insomnia, and since the habenula and septal nuclei play an important role in insomnia, sleep, and mood, it is meaningful to seed fMRI studies on these areas.

Disclosure of Interest: None Declared

EPP0736

The relationship between neurotrophins and cognitive functions in the context of emotional response to sleep deprivation

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Introduction: Studies conducted up to date on the subject of deprivation of sleep (DS) primarily focused either on its impact on certain cognitive abilities or mood-enhancing effects in patients with depression. A notable body of evidence suggests that both might be related to alterations in neurotrophin synthesis induced by DS. However, the role of NTs as an interface between DS, mood, and cognitive functions is unclear.

Objectives: The study aimed to investigate associations between cognitive abilities measured by Trail Making Test (TMT) and Stroop Color and Wort Test (ST), serum protein concentrations of brain-derived neurotrophic factor (BDNF), glial cell line-derived neurotrophic factor (GDNF), neurotrophin-3 (NT3), neurotrophin-4 (NT4) as well as the expression of their respective genes after a night of sleep deprivation.

Methods: Each participant (n=76) underwent a 24-hour DS under the control of actigraphy. Venous blood collection, TMT, and ST were carried out in the morning after DS. Mood was evaluated twice, after DS and in the preceding evening; based on the alleviation of depression symptoms participants were divided into respondents (RE; n=47) and non-respondents (NR; n=29). Serum protein concentration was determined using ELISA kits. Gene expression was evaluated by quantitative real-time polymerase chain reaction with gene-specific probes (reference gene: β -actin). Relative expression was calculated using the Livak formula. TMT is a neuropsychological instrument; Part 1 is thought to evaluate mostly attention, whereas Part 2 executive functions. ST is a 2-part

test applied in the assessment of response inhibition and complex attention.

Results: In RE, cognitive abilities were not associated with expression levels of any of the studied proteins or mRNA (all $p > 0.05$). In NR, BDNF and GDNF mRNA expressions negatively correlated with TMT Part 1 ($p = 0.017$, $p = 0.048$, respectively); scores obtained in TMT Part 2 bore a similar relation to BDNF, GDNF, and NT4 mRNA ($p = 0.034$, $p = 0.041$, $p = 0.026$, respectively). In this group, expression of all BDNF, GDNF, NT3, NT4 mRNA correlated negatively with both parts of ST ($p < 0.001$, $p = 0.009$, $p = 0.042$, $p = 0.009$ for Part 1; $p < 0.001$, $p = 0.003$, $p = 0.031$, $p = 0.014$ for Part 2, respectively).

Conclusions: Those results suggest that alterations in the synthesis of NTs might be an element of the molecular milieu characterizing different types of DS response. Negative correlations between test scores and NT mRNA expressions could imply that the reduction of the production of NT proforms might protect against the decline of cognitive functions in the aftermath of DS. Projects using a larger battery of tests as well as analyzing immature forms of NTs would be desirable in order to further investigate mechanisms underlying DS response.

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EPP0737

Impact of Palestine-Israel War on Tunisian People's Sleep

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Introduction: The Palestine-Israel War has reverberated across borders, transcending boundaries to affect individuals far beyond the conflict zone.

While much attention has been rightfully directed toward the immediate physical and psychological consequences within the war-torn regions, there is a growing need to explore the broader impact on the mental health of populations in neighboring countries including the sleep disorders among the Tunisian population during this war.

Objectives: To study the sleep disorders in Tunisian people related to the extensive war news broadcasting and to identify the factors associated to it.

Methods: It was a cross-sectional, descriptive and analytical study, conducted among Tunisians. Data were collected during October and November 2023, through an anonymous online questionnaire, spread throughout social media (Facebook/Instagram), using the Google Forms® platform. We used a socio-demographic and clinical data sheet and the Insomnia Severity Index (ISI) to measure the severity of insomnia.

Results: A total of 1091 participants completed the questionnaire. The participants' mean age was 32.7 ± 9.8 years, with a sex ratio (F/M) = 3.5.

The study revealed that 100% of the respondents followed the war, predominantly relying on social media (98.6%) with 55% closely monitoring the war via the media during more than 3 hours per day.

74.1% of the participants were Religious practitioners

According to the (ISI): a significant insomnia was found in 75.2% of participants.

The breakdown of insomnia severity indicated that 47.3% experienced subthreshold insomnia, 25.7% clinical insomnia of moderate severity, and 2.2% clinical insomnia of severe intensity.

The factors significantly associated with severe insomnia were: a male population ($p=0.018$) and an increase in religious practices ($p=0.031$).

Conclusions: The impact of the Palestine-Israel war on Tunisian individuals' sleep patterns, predominantly mediated through increased exposure via social media with using increase in religious practices as a possible coping mechanism.

The study highlights support initiatives to address the psychological repercussions of international conflicts on mental health. This suggests the importance of applying sleep hygiene rules and screening for sleep disorders.

Disclosure of Interest: None Declared

EPP0738

Insomnia and Its Association with Successful Aging in the Older Indian Population: A Large Population-Based Study Based on LASI, Wave 1

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Introduction: Evidence regarding the link between insomnia and successful aging (SA) in the older generation remains scarce.

Objectives: The purpose of this study is to explore the relationship of insomnia with SA within a substantial sample of the community-dwelling Indian population.

Methods: Data were drawn from the Longitudinal Ageing Study in India (LASI), Wave 1, conducted during 2017-2018. Older participants aged 60 years and above who completed both the insomnia and SA surveys were included. Insomnia was determined by the presence of at least one of three symptoms: 1) difficulty in initiating sleep; 2) difficulty in maintaining sleep; or 3) early morning awakening, occurring 5 or more times per week. SA was

assessed by five components: 1) absence of chronic diseases; 2) low probability of disability; 3) high cognitive functionality; 4) low probability of depression; and 5) active social engagement. The association between insomnia and SA was examined through survey-weighted multivariable logistic regression, with adjustments made for potential covariates. Subgroup analyses were carried out to evaluate interactions with age, sex, alcohol use, and smoking status.

Results: A total of 31362 participants met the eligibility criteria. The overall weighted prevalence was 9.91% for insomnia and 23.94% for SA. In fully adjusted models, insomnia exhibited a negative association with SA (OR 0.70; 95% CI 0.63-0.78, see Table 1) and with each of SA's components, except for the absence of chronic diseases (OR 0.94; 95% CI 0.85-1.04, see Table 1). Subgroup analyses, stratified by age, sex, alcohol use, or smoking status, did not reveal any significant interactions between insomnia and SA (p for interaction = 0.098, 0.873, 0.704, 0.095, respectively).

Table 1. Relationship between insomnia and successful aging.

Insomnia	ORs (95% CIs)		
	Unadjusted model	Model 1	Model 2
No	Reference	Reference	Reference
Yes			
Successful aging	0.50 (0.45, 0.55)	0.54 (0.49, 0.60)	0.70 (0.63, 0.78)
Absence of chronic diseases	0.66 (0.61, 0.71)	0.65 (0.60, 0.70)	0.94 (0.85, 1.04) [†]
Low probability of disability	0.43 (0.40, 0.46)	0.45 (0.42, 0.49)	0.51 (0.47, 0.55)
High cognitive functionality	0.66 (0.61, 0.72)	0.75 (0.68, 0.83)	0.78 (0.71, 0.87)
Low probability of depression	0.33 (0.30, 0.36)	0.34 (0.31, 0.38)	0.38 (0.34, 0.42)
Active social engagement	0.79 (0.73, 0.86)	0.87 (0.80, 0.95)	0.86 (0.78, 0.94)

[†] $p > 0.05$; ORs, odds ratios; 95% CIs, 95% Confidence intervals.

Model 1 adjusted for: age, sex, level of education, work status, marital status, place of residence, economic status, caste; Model 2 adjusted for: model 1 plus body mass index (BMI), alcohol use, smoking status.

Conclusions: Insomnia was negatively linked with SA within the older Indian population. Future prospective studies are warranted to validate these relationships, investigate underlying mechanisms, and enhance the understanding and promotion of SA.

Disclosure of Interest: None Declared