Objectives: Therefore, we aimed to explore differences between patients with GD with and without ADHD symptoms regarding psychopathology, personality, sociodemographic and especially treatment outcome measures.

Methods: This longitudinal study included *n*=170 patients with GD receiving 16 sessions of cognitive behavioral therapy (CBT) in a specialized unit of a public hospital. Multiple self-reported instruments were used to assess GD severity, personality, ADHD and other symptoms and sociodemographic measures prior to treatment.

Results: A clinical profile characterized by greater GD severity, higher psychopathology and impulsivity, and less adaptive personality features was observed in patients with self-reported ADHD symptoms compared to those without. No significant differences in treatment response (measured by dropout and relapse rates) were reported between the two groups. However, patients with ADHD symptoms described more severe relapses (more money gambled) and GD patients who relapsed scored higher on measures of ADHD, particularly inattention.

Conclusions: Individuals with GD and ADHD may experience more severe relapses following treatment, suggesting a need for more vigilant follow-up and interventions for patients with this comorbidity.

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O0004

Infertility Among Male Patients With Tramadol abuse

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Introduction: Tramadol abuse has become a crisis in Egypt and many other Middle Eastern countries. Tramadol abuse is associated with sexual dysfunction and male infertility, according to recent animal and human studies.

Objectives: The objective of this study was to compare tramadol abuse patients and healthy controls regarding free testosterone and prolac-tin levels and semen analysis.

Methods: Sixty patients with opiate use disorders attributed to tramadol (OUD-T) based on Diagnostic and Statistical Manual of Mental Disorders (Fifth Edition) diagnostic criteria and 30 healthy controls were included in the study. Sociodemographic and clinical data and urine, blood, and semen samples were collected from patients and controls for assessment.

Results: Compared with controls, OUD-T patients had higher prolactin and lower free testosterone levels. Patients with OUD-T were more likely to have lower sperm count and higher abnormal motility and forms of sperms compared with controls.

Conclusions: Patients with OUD-T were found to be more likely to have lower free testosterone levels and lower sperm counts and vitality, and higher prolactin levels and sperm abnormal forms compared with controls.

Disclosure of Interest: None Declared

O0006

Online Social Support and Trait Anxiety and Phubbing in Nurses

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Introduction: Phubbing with smartphones becoming an integral part of life and sociotelism behavior has emerged as an important academic concern (Chotpitayasunondh et al.,CHB,2016; 63, 9-18). Expectation of social support in social networks: It can be defined as "When the individual is emotionally intense, he/she shares about this situation and emotions and expects to be paid attention to, sincere and friendly approach from the people on social networking sites, and hopes that an environment of support and trust will be created with social networks by seeing that he/she is not alone with more emotional support." (Uzakgiden et. al., JASR 2019;2 20-24)

In the nursing profession, in addition to using the internet for professional requirements, being a member of online social networking sites and spending time on these platforms are increasing. It is important to know the status of phubbing, which damages face-to-face communication understand its effect on patient-nurse communication and nurses communication within the team. Due to the intensity of work life in the nursing profession and the length of hours spent at work, the effort to meet the need for social support virtually may increase phubbing behavior.

Objectives: The aim of this study was to examine the relationship among phubbing, online social support and trait anxiety, and the related factors in nurses.

Methods: The population of the research consists of nurses who actively use their social media accounts. Nurses were accessed by snowball method on online Whatsapp groups, Instagram and Facebook platforms through a digital survey between May and November 2021. Data collected by using an individual descriptive characteristics form, generic scale of phubbing, online social support scale, trait anxiety inventory. Mann-Whitney U, Kruskal-Wallis H tests, t-test and pearson correlation coefficient was used for data analysis.

Results: The phubbing scores of the nurses ranged from 15 to 98; the trait anxiety levels of the nurses were at a moderate level. It was observed that marital status, presence of WhatsApp groups with teammates, and being warned about the frequency of phone use

from teammates was related to phubbingg (p<0.001). There was a positive moderate correlation between the phubbing score and the online social support score; a weak positive correlation was found between the general phubbing score and the trait anxiety score.

Conclusions: It was determined that social support from social media significantly affected the phubbing behavior of nurses and that trait anxiety mediated this relationship. In future studies, researchers can conduct extensive research on the effect of sociotelism on nurse-patient communication and care. This study was also important in terms of making significant contributions to the literature, where there are only a limited number of studies on phubbing.

Disclosure of Interest: None Declared

O0007

The effect of maternal prenatal cannabis exposure on offspring preterm birth: a cumulative meta-analysis

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Introduction: Mixed results have been reported on the association between prenatal cannabis exposure and preterm birth.

Objectives: This systematic review and meta-analysis aimed to examine the magnitude and consistency of associations reported between prenatal cannabis exposure and preterm birth.

Methods: This review was guided by the Preferred Reporting Items for Systematic Review and Meta-Analysis (PRISMA) guidelines. We performed a comprehensive search of the literature on the following electronic databases: PubMed, EMBASE, SCOPUS, Psych-INFO, and Web of Science. The revised version of the Newcastle-Ottawa Scale (NOS) was used to appraise the methodological quality of the studies included in this review. Inverse variance weighted random effects cumulative meta-analysis was undertaken to pool adjusted odds ratios (AOR) after sequential inclusion of each newly published study over time. The odds ratio and 95% confidence interval (CI) limits required for a new study to move the cumulative odds ratio to the null were also computed.

Results: A total of 27 observational studies published between 1986 and 2022 were included in the final cumulative meta-analysis. The sample size of the studies ranged from 304 to 4.83 million births. Prenatal cannabis exposure was associated with an increased risk of preterm birth [pooled Adjusted Odds Ratio (AOR) = 1.35, 95% CI: 1.24-1.48]. The stability threshold was 0.74 (95%CI limit 0.81) by the end of 2022.

Conclusions: Offspring exposed to maternal prenatal cannabis use was associated with higher risk of preterm birth and it is strongly unlikely that any new epidemiological studies will change this conclusion. It is also plausible that avoiding cannabis intake during the prenatal period can reduce the risk of preterm birth.

Disclosure of Interest: None Declared

O0008

Admissions to the National Forensic Mental Health Service, Central Mental Hospital Dundrum, before, during and after the COVID-19 pandemic: changes in the need for security and urgency of need for admission

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Introduction: The Central Mental Hospital Dundrum, is Irelands only secure forensic hospital. It is unclear if there were changes in the need for security or urgency of need for admission prior to admission; before, during and after the covid-19 pandemic.

Objectives: We examined any changes in need for security and urgency of need for admission among those admitted to the CMH Dundrum from 2018 to 2022. We also examined the need for seclusion due to immediate risk to others at the time of admission. Covid precautions were not managed with seclusion.

Methods: This is a retrospective cohort study of all patients admitted from 1st January 2018 to 31st August 2022. Demographic data and diagnosis, capacity to consent to medication and hours in seclusion during day 1, week 1 and month 1 were collated. Need for therapeutic security (Dundrum-1) and urgency of need for admission (Dundrum-2) were rated prior to admission and collated by the research team. Data were gathered as part of the Dundrum Forensic Redevelopment Evaluation Study (D-FOREST). (Davoren et al., BMJ Open (2022) 12(7): e058581)

Results: During the 68-months there were 76 admissions. Mean age was 35.9 years, SD 9.9, males (80.3%). The most common diagnoses were schizophrenia (57.9%), schizoaffective disorder (15.8%), intellectual disabilty or autistic spectrum disorder (3.9%). 53.9% required seclusion on admission. There was no overall change in security need over the study period, but scores on triage urgency item 2 'mental health' increased. Time on the waiting list correlated with increasingly urgent mental health needs. On logistic regression, higher (worse) scores on 'mental health' need predicted hours of seclusion on day 1 (B=6.3, p<0.001) and week 1 (B= 25.5, p<0.001) but not month 1. Prolonged seclusion in prison prior to admission predicted hours of seclusion on day 1 (B=3.1, p<0.001) week 1 (B=16.7, p=0.003) and month 1 (B=51.5, p=0.003). Higher scores on life time institutional behaviour (DUNDRUM-1 item 10) (B=53.2, p<0.001) also predicted hours of seclusion in month 1.

Conclusions: We found increasing severity of mental health needs during the period studied. Seclusion early in the course of admission to the forensic service was closely linked to mental health needs. Continuing to require seclusion later in the admission was more closely linked to institutional behaviour such as having a history of coordinating disturbances or challenging behaviour whilst in prison services.

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