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tiple linear regressions were used to examine predictors of mental health impairment.

Results: Our findings demonstrate that only psychoeducation serves a protective factor against psychological distress. Interpersonal support was found to predict increased levels of anxiety and depression and adaptive coping was found to predict increased levels of anxiety, depression, and burnout. No significant relationship between community resources and any type of mental health impairment was found.

Conclusions: Public mental health efforts should capitalize on the effectiveness of psychoeducation to promote strategies for managing symptoms of psychological distress as well as providing information regarding resources and services. In the context of complex emergencies that have an immediate effect on already scarce resources at a personal, community, and institutional levels, psychoeducation has the advantage of a low-cost intervention, easily transferable between communities, providing immediate support as well as sustainability over time.

Disclosure of Interest: None Declared

EPV1066

The Suicidal Physician: When the Doctor Wants to Die

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Introduction: Medical-related professions are at high suicide risk. Suicide is a major cause of premature death among physicians, but the prevalence of suicide-related behaviors is inconsistent across studies.

Objectives: Presenting a review of the prevalence and risk factors of suicide among physicians.

Methods: Search on Pubmed* and Medscape* databases with the following keywords: "physicians" and "suicide". We focused on data from systematic reviews and meta-analyzes. The articles were selected by the authors according to their relevance.

Results: Female and US physicians were at higher risk of suicidal behavior. Suicide decreased over time, especially in Europe. Some specialties might be at higher risk such as anesthesiologists, psychiatrists, general practitioners and general surgeons. It is well established that anesthesiologists tend to have much higher rates of substance abuse than other physicians. Psychiatrists are also known to have more mental distress, mental illness and burnout compared with other physician groups and have concerning rates of depression and psychotropic. Physicians are less likely to seek mental health services out of career concerns, culture and/ or a predisposition toward self-reliance. Additionally, retrospective toxicology screening of suicide data finds that physicians are more likely than nonphysicians to have positive results for antipsychotics, benzodiazepines, and barbiturates but not antidepressants.

Conclusions: Physicians are an at-risk profession of suicide, with women particularly at risk. The rate of suicide in physicians decreased over time, especially in Europe. The high prevalence of physicians who committed suicide attempt as well as those with suicidal ideation should benefits for preventive strategies at the workplace. Physician suicides are multifactorial, and further research into these factors is critical. Appropriate preventive and

treatment measures should be implemented to reduce the risk of suicide-related behaviors in this population.

Disclosure of Interest: None Declared

EPV1069

Another Tragic Pandemic Strikes: It Is Suicide

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Introduction: Another pandemic besides COVID-19 stalks the land. This one takes a heavy toll on the young.

Suicide occurs throughout the lifespan and is the second leading cause of death among 15-29 years old globally.

Objectives: The objective of this review is to highlight for another tragic pandemic, with main emphasis on the preventable character. **Methods:** Data was obtained through an internet-based literature review, using the research platform Pubmed and the World Health Organization website. Seven articles from the last two years were included.

Results: Improved surveillance and monitoring of suicide attempts and self-harm is a core element of suicide prevention and desirable worldwide.

A public health surveillance system based on medical records would provide and disseminate data that would guide and prioritize the best interventions in each context and contribute to an effective overall suicide prevention strategy.

Conclusions: Close to 800 000 people die due to suicide every year, which is one person every 40 seconds.

According to current data, for each adult who died by suicide there may have been more than 20 others attempting suicide.

Effective and evidence-based interventions can be implemented to prevent suicide and suicide attempts.

Disclosure of Interest: None Declared

EPV1070

Suicide in the Azores Archipelago - a epidemiological study and review

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Introduction: The phenomenon of suicide and self-harm is one of the most intriguing and disturbing human behaviours. Suicide is global public health problem, with multiple and complex contributing factors. Global trend show a stabilizing or descending curves in the last years. The Portuguese atlantic archipelago of Azores has had an opposite trend that together with regional proctective and risk factors ought to be addressed for further tailored interventions. Objectives: Review of the up-to-date literature on this topic and present the recent suicide-related data in the Azores.

Methods: Unsystematic review of the most recent and relevant literature.

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Results: Epidemiology, risk and protective factors, preventive and treatment measures were described.

The Azores region has a ascending trend in the suicide mortality rate, opposing the portuguese trend. The azorean suicide mortality rate has a bimodal distribution and has higher values in every age group, except for the +75yo, when compared with the portuguese rates.

Image:

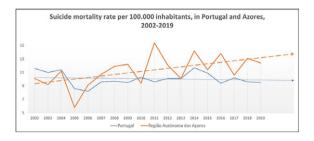
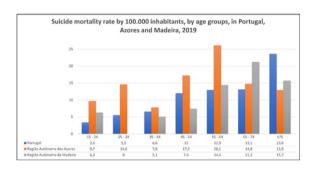


Image 2:



Conclusions: Multiple complex factors contribute to the suicide phenomenon. Suicide protective and risk factors mostly overlap with mental disorders' factors and those of other health and socioeconomic conditions.

Azorean suicide rates are growing against the global and national descending trends.

Prevention and treatment strategies to be implemented regionally must be fine tailored, accounting for the most relevant factors in place, in order to be most effective.

Disclosure of Interest: None Declared

EPV1071

Suicide Prevention and Specialized Intervention: Structuring Actions in a Psychiatry and Chemical Dependency Service in Rio de Janeiro City

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Introduction: Suicide presents itself as a serious public health problem, with universal characteristics. Though world rates dropped between 2010 and 2016, they are still very high and in

regions like the Americas there has been a raise in the same period in Brazil, contrary to the word trend and surpassing the avarage of the Americas (6%), the rate of suicides in each 100 thousand inhabitants has raised in about 7% in the period (WHO, 2019).

Objectives: Considering the relevance of these aspects, this study presents the results of actions for treatment and prevention of suicidal behavior, developed by a psychiatry and chemical dependency inpatient service in the city of Rio de Janeiro.

Methods: This showed the necessity of the creation of a specific program of suicidal treatment and prevention and the Institution established the following actions of intervention to hospitalized patients: permanent watching, reduction of access to instruments and methods to commit suicide, strengthening of the Life Appreciation Group (LAG) and the Cognitive Behavioral Therapy group, art therapy and physical activities.

Results: It was observed that among the 370 patients hospitalized in the Institution in the period of the study, 137 presented suicidal behavior and only 2 died. From these two cases, one abandoned treatment and the other ocurred during the period of treatment.

Conclusions: The developed program reached positive results in the intervention of the cases and the actions of prevention had expressive reach in the number of people, especially because the press promoted wide dissemination of information for immediate help.

Disclosure of Interest: None Declared

EPV1072

suicide among women, its clinical specificities and risk factors

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Introduction: In the general population, the authors have noted that most suicides are committed by men, this gender difference also includes the methods that suicidal people use to commit suicide; women tend to use less immediately lethal means such as drug ingestion in contrast to the methods that men adopt, which often include poisoning, hanging or the use of firearms. This is partly due to the fact that men verbalize their suffering less in the context of the hegemony of masculinity which delays the request for help.

Objectives: Our objective is to describe the profile of female patients admitted to the AR-RAZI hospital in Salé for suicide attempts and/or with a previous suicide attempts and their treatment and to identify the risk factors, which will allow us to develop preventive therapeutic strategies, taking into account their age, their reasons for hospitalization and clinical presentation on admission; their physiological characteristics, their somatic and psychiatric co-morbidities and their socio-cultural factors.

Methods: We have performed a cross-sectional study of 59 female patients admitted to Ar-Razi Psychiatric Hospital for suicide attempt or having already committed at least one suicide attempt, by means of a questionnaire specifying their age, marital status, occupation, socioeconomic level and residence.

The patients in question were recruited within a 2-year time frame, coming for the most part from the regions of the kingdom that our center covers.