Results: The effect of the interventions on posttraumatic growth among cancer survivors were heterogeneous. The effect size was statistically significant (Tables 1,2).

Table 1

	Total k n	Hedges'g	SE	95% CI	z	p	Q Value	I^2	Eggers t	Eggers p
Overall studies	t 715	1.761	0.484	[0.812, 2.709]	3.637	< 0.001	182.807	96.718	4.66	.871

Table 2

Design	Studies	k	Total n	Intervention Effect Hedges'g	SE	95% CI
RCT	Ochoa-Arnedo et al. (2020)	7	140	0.113	0.168	[-0.217, 0.443]
	Üzar-Özçetin & Hiçdurmaz (2019)		76	13.965	1.155	[11.700, 16.229]
	Kenne Sarenmalm et al. (2017)		114	0.423	0.189	[0.053, 0.793]
	van der Spek et al. (2017)		91	-0.161	0.208	[-0.569, 0.247]
	Yun et al. (2017)		174	0.331	0.162	[0.014, 0.648]
	Zhang et al. (2016)		58	2.033	0.321	[1.405, 2.662]
	Zernicke et al. (2014)		62	1.254	0.275	[0.715, 1.793]

Z = 3.637 P= < 0.001 SE = 0.484 Sd = 1.777

Conclusions: Posttraumatic growth interventions significantly increased posttraumatic growth among cancer survivors. Health care providers as the main sources of cancer care should be more focused on the achievement of positive outcomes.

Disclosure: No significant relationships.
Keywords: pychooncology; posttraumatic growth; mental health; meta-analysis

EPP0043

Illness and tretment representation in onological patients undergoing chemotherapy: relationship with subjective well-being

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Introduction: The knowledge, expectations, fears that a patient has about the oncological disease and treatment can affect the quality of life of patients (Colagiuri et al., 2013; Whitford, 2012).
Objectives: The aim was to reveal the relationship between well-being of patients with cancer undergoing chemotherapy and their illness and treatment representation.
Methods: 110 patients undergoing chemotherapy in Medsi Clinical Hospital filled Chemotherapy Attitudes Questionnaire (Zinchenko et al., 2020), Life Satisfaction Scale (Diener et al., 1985), Scale of Positive and Negative Experience (Diener et al., 2009), Quality of Life Questionary C30 (Aaronson N. K. et al., 1994), Illness

Perception Questionnaire (Moss-Morris et al., 2002), Self-Regulation Questionnaire in the Rehabilitation Process (Kovyazina M. et al, 2019), Hospital Anxiety and Depression Scale (Zigmond, Snaith, 1983).
Results: Correlation analysis revealed that patients with severe difficulties in physical functioning had a lower level of life satisfaction (R = -0.23, p <.05) and quality of life (R = -0.35, p <.001), perceived disease as long-term (R = 0.34; p <0.001), cyclical (R = 0.33; p <0.001) and carrying significant negative consequences for life (R = 0.55; p <0.001), also these patients were characterized by anxiety about health during treatment (R = 0.37; p <0.001).
Perception of illness duration, personal control, emotional representations, self-efficacy, confidence in the effectiveness of treatment can predict the level of satisfaction with life of cancer patients undergoing chemotherapy (R^2 increased from 0.05 to 0.37, p<0.001).
Conclusions: Health anxiety, illness duration, personal control, self-efficacy could be targets for interventions in patients undergoing chemotherapy.

Disclosure: No significant relationships.
Keywords: psycho-oncology; chemotherapy; illness representation

Child and Adolescent Psychiatry 01

EPP0044

The relationship between nonsuicidal self-injury, suicidal behaviour and life events among adolescents

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Introduction: Nonsuicidal self-injury (NSSI) is highly prevalent in clinical and non-clinical adolescent populations. Non-clinical studies focus on high school students thus vocational school students are underrepresented in research and prevention programs, despite being exposed to higher levels of stressful life events, a factor associated with NSSI and suicide.
Objectives: This study aimed to explore NSSI, suicidal behavior and life events among adolescents in clinical and non-clinical, i.e. both high school and vocational school settings.
Methods: A clinical (n=202) and non-clinical (n=161) sample of 13-18-year-old adolescents were assessed with the Mini International Neuropsychiatric Interview Kid, the Deliberate Self-Harm Inventory, and the Life Events List. Data were analyzed with R version 3.6.1., using Wilcoxon tests and negative binomial regression models.