

**Conclusions:** The developed method is able to detect W18 presence in urine samples. This method has the potential to be used in clinical and research studies.

**Disclosure of Interest:** None Declared

## Anxiety Disorders and Somatoform Disorders

### EPP0280

#### Assessment of the intensity of state-trait anxiety of children with cancer

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**Introduction:** Children with cancer face many difficulties on a daily basis which place them at increased risk of developing anxiety and discomfort.

**Objectives:** To assess the intensity of state-trait anxiety in children with cancer.

**Methods:** The sample of the study consisted of 100 children from Greek Children's Hospital, aged 8-16 years, of which 56 had cancer, representing the study group while the control-group was 44 in an outpatient clinic with endocrinological problems. Data were collected by the completion of the questionnaire "State-Trait Anxiety Inventory for children" by Ch. Spielberger. Statistical package S.P.S.S. was used for statistical analysis. 22 and the statistical test, t-test and anova. The significance level was set at  $p < 0.05$ .

**Results:** Of the total sample, sarcoma 38%, brain Ca 14%, 48% endocrine problem, and the largest percentage (57%) were aged 8-10 years. Children with cancer in 44.6% were under treatment and 55.4% in remission or recovery. Body image change was experienced by the 44%. The mean value of the state anxiety was  $30.3 \pm 5.4$  and trait was  $35.3 \pm 6.9$ . Children with cancer experienced lower levels of state anxiety compared to control group,  $p = 0.049$ , and did not differ in terms of trait anxiety,  $p = 0.060$ . In the total sample, girls experienced trait anxiety of the highest intensity,  $p = 0.018$  and children aged 14-16,  $p = 0.020$ . No statistically significant differences were found in relation to the type of cancer in both state and trait anxiety,  $p = 0.096$  and  $p = 0.424$ , in relation to the phase of the disease and the change of body image,  $p > 0.05$ . Children whose fathers were of higher education experienced less anxiety and differed significantly from those of primary and secondary education,  $p = 0.036$  and  $p = 0.021$ , respectively. Comparison between control group and study group in relation to gender, showed that girls with cancer experienced trait anxiety of higher intensity,  $p = 0.029$  but children between 14-16 years from the control group experienced trait anxiety of higher intensity,  $p = 0.030$ .

**Conclusions:** Children of both groups experienced mild to moderate anxiety and its intensity was related to socio-demographic factors of the children and their parents.

**Disclosure of Interest:** None Declared

### EPP0281

#### Psychiatric disorders in patients with rheumatoid arthritis

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**Introduction:** Rheumatoid arthritis (RA) is a systemic inflammatory disease that can lead to significant morbidity and especially to psychiatric disorders. Depression and anxiety are common symptoms in RA patients, and seem to influence disease activity, pain, and treatment response.

**Objectives:** The aim of this study was to investigate the prevalence of depression and anxiety and their related factors in RA patients.

**Methods:** 100 patients diagnosed with rheumatoid arthritis according to ACR1987 or ACR/EULAR criteria 2010 were investigated. Demographic, clinical and laboratorial data were obtained from hospitals records.

The RA severity Disease Activity was assessed by the Disease Activity Score (DAS 28). Physical function was assessed by the Health Assessment Questionnaire-Disability Index (HAQ).

The Hospital Anxiety and Depression Scale (HAD a/d) was used to evaluate the depression and anxiety symptoms. Patients with results greater than 11 are considered depressed or anxious.

**Results:** The group studied included 87% of women and 13% of men. The median age was 55.2 years [27-83]. The median disease duration was  $11.7 \pm 8.9$  years.

The majority of the patients were unemployed, they were housewives in 65% of the cases, retired in 6% and 2 % had taken sick leave. The median ESR was  $44 \pm 31.6$  mm, and the median of CRP level was  $26 \pm 35.3$  mg/l. The median disease activity (DAS 28) was  $4.6 \pm 1.4$ . Forty-five % had moderate disease activity ( $3.2 \leq \text{DAS } 28 \leq 5.1$ ), and 27% of the sample had high disease activity ( $\text{DAS } 28 > 5.1$ ). The mean of the HAQ was 1.1 [0-3].

The anxiety and depression questionnaire (HAD a/d) showed means of 10.6 for depression, and 10.25 for anxiety respectively. Depression was presented in 46 % of RA patients. Anxiety was presented in 48 %.

There was a correlation of HAD a/d with employment status ( $p < 0.05$ ), and functional disability (HAQ) ( $p < 0.001$ ).

There was no significant association of anxiety and depression scales with RA disease activity.

**Conclusions:** Chronic inflammation impairs the physiological responses to stress, resulting in depression, anxiety which leads to a worse long-term outcome in RA.

Physical disability and social factors, are predictive of psychiatric disorders in RA. This fact must be taken into account when evaluating therapeutic response.

**Disclosure of Interest:** None Declared