**Methods:** A narrative review of the relevant studies focusing on psychiatric comorbidities and psychosocial interventions for reducing the caregiver burden in caregivers of patient with epilepsy was comducted.
**Results:** Caregivers of patient with epilpsy have poor quality of life and are at risk of developing psychiatric illnesses.Caregiving was reported to negatively impact one's physical and mental health, overall family functioning, and financial status. Psychological interventions such as **psychoeducation, individual, group or family counselling, Interpersonal and social support networks, relaxation therapy and cognitive behaviour therapy** have been used to treat caregiver burden associated with epilepsy caregiving.
**Conclusions:** Caring for patients with epilepsy is challenging and it is associated with enormous burden. It can lead to mental health problems which ultimately affects the compliance to treatment and overall prognosis. Psychosocial interventions can prepare caregivers for a better role of caregiver and better management of the care process. There is increased need to focus on this unexplored area through research and to provide effective interventions as a part of clinical services.

**Disclosure of Interest:** None Declared

## EPV0827

## The Burden of Mental Disorders in the world – a GBD 2021 analysis in the WHO regions

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**Introduction:** The Global Burden of Disease (GBD) study has generated a plethora of worldwide data on mortality and disability, including the disease burden due to mental disorders, often amenable to interventions, essential for health planning.
**Objectives:** This work aims to report the burden of mental disorders in disability-adjusted life years (DALYs), from 2001 to 2021, globally and in the six World Health Organization (WHO) regions.
**Methods:** Retrospective descriptive study, using secondary data from the GBD 2021 Results Tool. Globally and for each of the six WHO regions, age-standardised DALY rates are reported and respective 95% uncertainty intervals, between 2001-2021, for both sexes and for males and females. All data analysis was performed using R version 4.0.5.
**Results:** In 2021, the both-sex age-standardised DALY rate due to mental disorders was 1909.15 (1440.16 – 2437.88) DALYs per 100,000 globally, with great heterogeneity across regions: the Americas with 2379.96 (1786.30 – 3026.74) DALYs per 100,000, the highest burden, and the Western Pacific with 1517.45 (1159.48 – 1910.43) DALYs per 100,000, the lowest. Between 2001-2021, the global both-sex age-standardised DALY rate remained relatively stable and even decreased slightly until 2019 but a sharp increase occurred in 2020 and 2021. This pattern generally held up across regions, with the Americas consistently the region with the highest burden, followed by Eastern Mediterranean, Europe, Africa, South-East Asia and Western Pacific. The European region showed the largest increase in 2001-2021 (from 1895.12 (1435.12 – 2420.97) to 2162.03 (1609.92 – 2777.89)). The same pattern occurred in females across regions, but an important difference in males was observed, with the Eastern Mediterranean region presenting the highest burden in 2021 (2012.54 (1523.41 – 2569.42), after overtaking the Americas in 2008.
**Conclusions:** The burden of mental disorders remained relatively stable between 2001-2019 with a sharp increase in 2020-2021 globally, and great heterogeneity between regions and some important differences between sexes. Besides opportunities for mutual learning, essential for health planning, cultural sensitivities and social/economic contexts can be important factors associated to these patterns: the COVID-19 pandemic may have been an important trigger for this sharper increase in burden. These results highlight the different patterns of disease burden due to mental disorders in the world and the need for tailored strategies.

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## EPV0828

## Mortality Rates from Suicide in Brazil in 2021: A Comprehensive Demographic Analysis by Sex and Age Group

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**Introduction:** Suicide represents a significant and growing public health challenge in Brazil, reflecting a complex interplay of social, economic, and mental health factors.
The increasing rates of suicide highlight the need for targeted interventions and policies. Understanding the demographic characteristics associated with suicide, particularly in relation to sex and age, is crucial for developing effective prevention strategies and health policies. This study utilizes data from the 2024 epidemiological bulletin, "Panorama dos Suicídios e Lesões Autoprovocadas no Brasil de 2010 a 2021."
**Objectives:** This study aims to provide an analysis of the mortality rates from suicide in Brazil for the year 2021. The primary focus is on exploring the distribution of suicide rates by sex and age group, as well as evaluating the proportional mortality in relation to the total number of deaths in the country.
**Methods:** The study utilized data sourced from the Mortality Information System (SIM) and the aforementioned epidemiological bulletin, which compiles comprehensive mortality data across Brazil. We analyzed the rates of mortality from suicide, categorizing the data by age groups: 05 to 14 years, 15 to 19 years, 20 to 29 years, 30 to 49 years, 50 to 69 years, and 70 years and older. The analysis further differentiated the data by sex, allowing for a nuanced understanding of demographic variations.
**Results:** In 2021, Brazil reported a total of 15,507 deaths attributed to suicide. Of these, 12,072 (1.21% proportional mortality) were male, and 3,431 (0.43% proportional mortality) were female, indicating a substantial gender disparity in suicide rates. The mortality rates from suicide per 100,000 inhabitants varied significantly by age group: 0.7 for males and 0.9 for females in the 05 to 14 years age group; 9.3 for males and 4.5 for females in the 15 to 19 years group; 14.6 for males and 3.9 for females in the 20 to 29 years group; 14.9 for males and 3.8 for females in the 30 to 49 years group; 15.4 for

males and 3.8 for females in the 50 to 69 years group; and 18.1 for males and 2.9 for females aged 70 years and older. Notably, among the leading causes of death, suicide ranked 11th for the 05 to 14 years age group (3.41%), 3rd for the 15 to 19 years age group (6.90%), and 4th for the 20 to 29 years age group (5.56%). These figures underscore the significant impact of suicide on young populations.
**Conclusions:** The high mortality rate from suicide in Brazil underscores the urgent need for public health policies focused on suicide prevention. Effective interventions should include mental health support, community outreach programs, and increased awareness campaigns aimed at reducing the stigma around mental health issues. By addressing the underlying social and economic factors contributing to suicide, Brazil can improve health outcomes and enhance the quality of life for at-risk populations.

**Disclosure of Interest:** None Declared

## EPV0829

## Epidemiological Trends and Hospitalization Profile of Alcohol-Related Mental and Behavioral Disorders in the State of São Paulo, the Most Populous State of Brazil, 2023

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**Introduction:** Mental and behavioral disorders resulting from alcohol use are a significant public health issue. As the nation's most populous state, São Paulo encounters distinct challenges in this domain. According to the 2022 Census, the most recent national demographic survey, the state of São Paulo's population is estimated at 44,411,238, representing approximately 21.9% of Brazil's total population of 203,080,756. Understanding the epidemiological profile of these disorders is crucial to better assess their impact on the healthcare system and to guide effective resource allocation and management strategies.
**Objectives:** The present study aims to analyze statistical data related to hospitalizations due to mental and behavioral disorders caused by alcohol use in the state of São Paulo in 2023.
**Methods:** A cross-sectional, descriptive, retrospective, and quantitative study was conducted, focusing on hospitalizations of individuals diagnosed with mental and behavioral disorders due to alcohol use in the state of São Paulo during 2023. Data were collected from the Department of Health Informatics of the Brazilian Unified Health System (DATASUS) within the "Hospital Information System of SUS" section, examining variables such as age range, gender, ethnicity, and length of hospital stay.
**Results:** In 2023, São Paulo recorded 5,898 hospitalizations for alcohol-related mental and behavioral disorders, with total expenditures amounting to R$ 9,215,994.94. The average length of stay was 22.9 days, and the overall mortality rate was 0.64%, with 38 deaths. The highest number of hospitalizations occurred in the 35-39 years (12.1%), 40-44 years (14.7%), and 45-49 years (15.5%) age groups, which together accounted for 42.3% of all cases. Men represented 86.1% of hospitalizations, with an average length of stay of 23.4 days compared to 19.9 days for women. The ethnic distribution showed that 52.9% of hospitalizations were among White individuals, 8.3% were Black, 37.5% were Multiracial, and 0.7% were Asian. The longest average stays were among White individuals (25.1 days), followed by Black (22.2 days) and Multiracial (20.2 days). The overall mortality rate was 0.64%, with a slightly higher rate in men (0.65%) compared to women (0.61%). Black individuals had the highest mortality rate (1.23%), particularly among men (1.25%).
**Conclusions:** This study underscores the public health impact of alcohol-related mental and behavioral disorders in the state of São Paulo, particularly among middle-aged men. Ethnic disparities in hospitalization duration and mortality suggest the need for targeted healthcare strategies to meet diverse demographic needs. These findings highlight the importance of tailored interventions and strategic resource allocation to reduce the burden of alcohol-related disorders and enhance health equity.

**Disclosure of Interest:** None Declared

## EPV0830

## High Prevalence and Socioeconomic Inequalities of Mental Disorders Among Adults with Disabilities in Western Iran

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**Introduction:** There is very little information about the mental health status of people with disabilities in Iran, while monitoring the status of this index is very necessary to properly address problems, design appropriate interventions, and evaluate the impact of interventions.
**Objectives:** in this regard, this study investigated the prevalence of mental disorders among adults with physical and sensory disabilities in Sanandaj City, Iran.
**Methods:** This descriptive-analytical and cross-sectional study was conducted on people with physical and sensory (sight, hearing and speech) disabilities over 18 years of age in Sanandaj city in 2023. A two-part questionnaire was used in order to collect data in this study. The first part consisted of age, sex, type of disability, basic health insurance status, supplementary health insurance, education, employment status, and economic status (wealth assets). The second part included Goldberg's 28-item questionnaire (GHQ-28) that was used as a screen tool for mental disorders. Data were analyzed using STATA software version 16.0 (Stata Corp, College Station, TX, USA.)
**Results:** Finally A total of 607 people (response rate: 99%) participated in this study that 317 were men (52.2%) and 290 were women (47.8%). The prevalence of mental disorders suspicion was 56.7% (344 people) and its prevalence based on the severity of the disorder was 29.7% mild, 16.6% moderate and 10.4% severe. Results indicated that over 56% of participants were suspected of having a mental disorder, with the most common being depression and anxiety. Females, younger participants, the unemployed, those without supplementary health insurance, and those from lower economic classes had significantly higher odds of mental disorder suspicion. An uneven distribution was observed, with a disproportionate concentration among the lower economic status group.