

Objectives: We aim to highlight the risk of psychiatric comorbidities following TN diagnosis and discuss the potential burden depicted by the phrase “suicide disease”.

Methods: We presented a case report and conducted a non-systematic review of the literature.

Results: A 72-year-old female patient with history of diabetes, hypertension, dyslipidemia, recurrent thrombophlebitis but no previous relevant psychiatric history, presents with depressive mood, anhedonia, insomnia, reduced appetite and feelings of hopelessness, which began 3 months prior. These symptoms started shortly after she began experiencing paroxysms of intense electric shock-like pain in the right hemiface, allodynia (specially triggered by the wind, talking, chewing and light touch) and lacrimation of the right eye. The patient had multiple consultations with neurology and psychiatry physicians. TN was presumed and the patient initiated treatment with pregabalin and intravenous infusions of lidocaine, as well as antidepressants. Magnetic resonance angiography revealed neurovascular compression of the right trigeminal nerve, supporting the diagnosis. Depressive symptoms aggravated and she experienced recurrent suicidal thoughts as she became aware of the TN diagnosis and experienced debilitating symptoms due to initial suboptimal pain relief. Oxcarbazepine was later introduced in the treatment plan and pain relief was slowly achieved. Suicidal ideation waned despite maintenance of depressive mood. Evidence shows there is a higher risk of newly diagnosed depressive, anxious and sleep disorders following TN diagnosis, most likely due to its deleterious effect at a psychological, behavioral and social level. Currently, however, the phrase “suicide disease” may be an ill-suited one as the lack of information on suicide rates among patients with TN and the availability of new and more efficient therapeutic options do not support its present use.

Conclusions: This case exemplifies the increased risk of new psychiatric comorbidities following TN diagnosis, further aggravating patients' quality of life. Despite its historical significance, the label “suicide disease” seems to lack current applicability and may not only harm patients' understanding and acceptance of the diagnosis, but also exacerbate fear and stress concerning its prognosis.

Disclosure of Interest: None Declared

EPV1345

Psycho-social profile of patients with chronic neuropathic pain and spinal cord stimulation outcome: preliminary finding from an Italian sample recruited at the University Hospital of Verona (Italy)

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Introduction: Spinal cord stimulation (SCS) is used to treat chronic neuropathic pain (CNP) resistant to other therapies and procedures. The treatment involves implanting a device that delivers electrical stimulation along the ascending nerve pathways. According to the bio-psycho-social model of pain, the success of SCS is influenced by more than just the technical aspects of the procedure. Psychological and context-related factors also play a crucial role.

Objectives: To profile a sample of Italian patients with CNP in the pre-implant phase from a psycho-social perspective, using such data to predict the SCS outcome.

Methods: Candidates for SCS at the Pain Therapy Center of the University Hospital of Verona (Italy) undergo a psychological assessment at the Clinical Psychology unit before the implantation. This assessment includes an interview to evaluate the impact of pain, coping strategies, and family support, as well as any history of traumatic experiences, psychiatric conditions, and lifetime use of alcohol or substances. Additionally, a series of questionnaires are administered to assess pain (Brief Pain Inventory, BPI), psychopathology (Symptom Checklist 90, SCL-90), personality (Minnesota Multiphasic Personality Inventory, MMPI-2), coping style (Coping Strategies Questionnaire, CSQ), the tendency to catastrophize (Pain Catastrophizing Scale, PCS), family and social support (Multidimensional Scale for Perceived Social Support, MSPSS), and self-efficacy (General Self-Efficacy Scale, G-SES). Patients are evaluated at 6 months follow-up (now ongoing).

Results: To date, 131 patients (mean age 62.6±13.8; 56% females) have been evaluated at baseline. Overall, they show high percentages of somatization (71% of the sample), sleep disturbances (70%), depressive (40%), and obsessive-compulsive (38%) symptoms, together with moderate levels of catastrophizing (18.4±9.4 on the 0-36 range of the catastrophizing CSQ subscale), and a personality profile characterized by health worries (26%), somatic complaints (19%), and cynicism (26%). Overall, they perceive a moderate level of self-efficacy (30.83±4.9 on the 0-40 range of the G-SES) and good family or social support (84%).

Conclusions: Patients with CNP who are candidates for SCS show a peculiar psycho-social profile in terms of personality traits, coping strategies, and psychopathology. Using a pre-implant psycho-social assessment has significant implications for clinical practice since it allows to identify patients at a higher risk of SCS failure. It also enables the early detection of individuals who may benefit from psychological support before or after the SCS procedure.

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EPV1346

Mental health and disability among patients with chronic sciatica

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Introduction: Sciatica pain represents a typical symptom of spinal radicular syndromes. Disability due to this pain can affect mental health of patients.

Objectives: Our study aims to assess the relationship between mental health and disability among patients with chronic sciatica.

Methods: We conducted a descriptive, analytical and cross-sectional survey among patients suffering from documented common sciatic pain evolving for more than 3 months. We collected socio-professional data. We used the Hospital Anxiety and Depression Scale (HADS) and the Oswestry Disability Index (ODI).

Results: Our study population was exclusively female, including 69 patients. The mean age of participants was 56.2 ± 12.6 years. The most frequent etiology of sciatica pain was a herniated disc, followed by lumbar spinal stenosis and spondylolisthesis. The root path was L5 in 49 cases and S1 in 20 cases. The mean Oswestry score was 25 ± 4.1 . The disability was moderate, severe and crippled respectively in 10.1%, 82.6% and 7.2% of patients. Regarding the patients' anxiety levels, it was found that 76.8%, 20.3%, and 2.9% appeared to have mild, moderate, and severe anxiety, respectively. As for the depression levels of patients, 13 were mildly depressed (18.8%), 20 were moderately depressed (29%), and 36 were severely depressed (52.2%). We found that anxiety and depression were correlated with disability ($p = <0.05$, $r = 0.2$).

Conclusions: Our findings highlight a correlation between altered mental health and disability among patients with chronic sciatica. It is crucial to screen psychiatric disorders among these patients in order to improve their well-being.

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Personality and Personality Disorders

EPV1349

Digital tools for training speech therapists: diagnosis of speech disorders in children

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Introduction: The evolution of digital technologies creates new potential in training specialists who work with children with speech development disorders (6A01.0, ICD-11). The use of digital tools, such as video cases depicting real or simulated speech disorders, provides more opportunities for students to acquire practical diagnostic skills in classroom settings before encountering real individuals with speech disorders.

Objectives: Identifying the attitudes of students, future speech therapists, towards the use of classroom-based diagnostic simulation as a form of training.

Methods: Sixty-two second-year students in the Speech Therapy program were surveyed. The future specialists were asked to anonymously answer open-ended questions about which training methods they consider most effective for enhancing their competencies in diagnosing children with speech disorders.

Results: Forty-three students indicated that they would like to increase the number of practical hours in pre-schools and schools, where they can observe real cases of speech disorders. Thirty-nine students responded that during classroom sessions and self-study, they would like to have unlimited access to video materials showcasing the widest possible range of speech disorders.

Conclusions: Future speech therapists are highly interested in the practical study of speech disorders. However, during their internships, students are often limited in their access to diverse range of examples of the disorders. Creating an educational digital resource featuring video cases which allows students to study cases of speech disorders not only during class time but also during independent work at their own convenience and pace will significantly

contribute to successful development of diagnostic competencies. This paper has been supported by the Kazan Federal University Strategic Academic Leadership Program (PRIORITY-2030).

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EPV1350

Specifics of anticipatory competence of adolescents with motor disorders

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Introduction: Anticipatory competence allows an adolescent to act and make important decisions in life and activities with a certain temporal-spatial foresight. However, due to their disorder, adolescents with motor impairments are not always able to anticipate the development of future events, and they experience difficulties in establishing social contacts and understanding the emotional states of others.

Objectives: To study the specifics of anticipatory competence in adolescents with motor disorders.

Methods: The study involved 46 adolescents (aged 12-15) attending educational institutions for children with disabilities, with a history of spastic diplegia, spastic tetraplegia, and ataxia. The research employed the following methods: the "Achenbach's Questionnaire," V.D. Mendeleevich's "Test of Anticipatory Competence," V.P. Ulyanova's "Anticipation of the Outcome of a Situation with Norm Violations," and the authors' method "Study of Anticipatory Competence of Adolescents" by A.I. Akhmetzyanova and T.V. Artemyeva.

Results: The study revealed that, although the overall level of anticipatory competence in adolescents with motor disorders is quite high, these children experience difficulties in spatial orientation and in structuring a sequence of actions. They encounter challenges in planning future activities and they frequently experience delays. Adolescents with this pathology demonstrated low anticipatory competence in virtual reality, indicating difficulties in virtual communication with others.

Conclusions: The findings of this study on the specifics of anticipatory competence in adolescents with motor disorders will help develop and implement programs for the social adaptation of children, preparing them for future professional activities and independent living in the community.

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EPV1351

Regulation of the Subjective Experience of Safety in Humor among Younger Schoolchildren

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