

EPP0325

Analyses of Pharmacokinetic, Pharmacogenetic and Psychometrics Correlates of Antidepressants Use during Pregnancy and the Post-Partum Period

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Introduction: About 15% of women experience a depressive episode during pregnancy, and 19% during the postpartum. Studies on safety of Antidepressants use during pregnancy have given controversial results. Obstetric-gynecological changes of pregnancy determine modifications in the pharmacokinetics of medications, through an altered metabolism of the CYP enzymes. Patient's therapeutic response might also be influenced by polymorphisms of the genes encoding CYP enzymes.

Objectives: In this perspective, we evaluated the correlation between pharmacokinetics, pharmacogenetics and psychopathological measures, analyzing SSRIs or SNRIs concentrations during the three trimesters of pregnancy, at birth and at postpartum, in order to define efficacy, tolerability and safety of Antidepressants (ADs) in the treatment of affective and anxiety disorders during pregnancy.

Methods: 87 patients were enrolled at the Depressive Disorders Treatment Centre (CTDD) of the Department of Psychiatry of Sacco University Hospital (Milano, Italy). Plasma concentrations of ADs were measured during first (T1), second (T2), third (T3) trimester, at birth (T4) and at postpartum (T5). Psychometric assessments were carried out. The genotype of hepatic CYP isoforms were also analysed.

Results: ADs mainly metabolized by CYP2C19 (es. Sertraline) are less frequently below therapeutic range than ADs metabolized by CYP2D6. In fact, the metabolic activity of CYP2C19 is slowed down during pregnancy. The majority of ADs concentrations below therapeutic range were found in women with an accelerated metabolism, carrier of a CYP polymorphism.

Conclusions: Our results underline that the systematic use of pharmacokinetic and pharmacogenetic analyses during pregnancy could constitute a valid support in the management of therapy in the last phases of pregnancy.

Disclosure: No significant relationships.

Keywords: psychopharmacology; Pregnancy; Perinatal psychiatry

EPP0324

How mothers of terminally ill children cope and appraise their life situation

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Introduction: Mothers of terminally ill children experience chronic stress that can lead to physical and emotional exhaustion.

A better understanding of their experiences, resources, and vulnerabilities can help plan psychological interventions.

Objectives: The research is aimed to study mothers' appraisals of their life situation related to the child's terminal illness and their coping strategies.

Methods: Participants: 21 women (aged 26-49) whose children were patients at the hospice. Women answered a set of open-ended questions and completed questionnaires: "Appraisal Criteria of the Difficulty of a Life Situation", "Types of Orientations in Difficult Situation", "Ways of Coping Checklist". Data were analyzed with Pearson's r.

Results: Planned coping was associated with evaluations of opportunity ($r=0.78$) and threat to the future ($r=0.61$). Despite the deteriorating health status of most of the children, women reported a high degree of subjective control. This might be related to outside help. Participants stated that helping by the family, doctors, and psychologists was essential. Unexpectedly, the "need for a quick and active response" score correlates with that for the coping strategy "fantasizing" ($r=0.62$). This can be explained by the depletion of resources; deprivation of sleep and active rest is often observed. An important feature is that half of the participants report high self-blame.

Conclusions: We suggest that self-blame, an analysis of opportunities, and probable future scenarios are important psychotherapy targets for mothers of terminally ill children. The consequences of threat appraisal are twofold: admitting the threat can be painful, but it also mobilizes one's energy. Funding: The study was funded by RFBR, project number 20-013-00838.

Disclosure: No significant relationships.

Keywords: life situation; coping strategies; subjective appraisal

EPP0325

The sense of guilt of the mothers of children with special needs

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Introduction: The fact of emergence of a child with special needs in a family is followed by intensive emotional reaction of the parents. One of the pronounced feelings in those circumstances is the sense of guilt.

Objectives: The research aim is studying the emotional experience of mothers of children with special needs connected with the sense of guilt and the characteristics of the parent-child relationship in such families.

Methods: The research sample includes 25 mothers of children with special needs in the age from 3 to 10 years old with the diagnosis ASD, cerebral palsy and epilepsy as well as 29 mothers of normally developing children of the same age. Research methods: Guilt Inventory (Jones &Kugler); Inventory of Parental Attitude (Varga &Sto-lin); Inventory of the Parent's Psychological Type(Tkacheva).

Results: The mothers of children with special needs show the more pronounced sense of guilt comparing with the mothers of the healthy children. They are less optimistic towards the future of the child, more sensible to the failures of the child, but demonstrate the higher degree of readiness to cooperation with the child. Those results can be applied when designing the intervention programs for the families of children with special needs.

Conclusions: Those results can be applied when designing the intervention programs for the families of children with special needs.

Disclosure: No significant relationships.

Keywords: sense of guilt; children with special needs

EPP0326

“I heard the heartbeat”- Psychophysiological and Sociocultural Determinants in Pseudocyesis and Delusion of Pregnancy

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Introduction: Pseudocyesis and Delusion of Pregnancy are often conflated. Both presentations are associated with false beliefs of pregnancy in patients who are not pregnant. Pseudocyesis is associated with physiological changes of pregnancy such as amenorrhea, galactorrhea, abdominal distention, and hyperprolactinemia. Delusion of Pregnancy is not associated with physiological signs/changes. We describe a case to demonstrate the phenomenological and physiological differences between these entities and how these influence treatment considerations.

Objectives: 1. Phenomenology of Pseudocyesis vs Delusion of Pregnancy 2. Elucidate the physiological underpinnings of both 3. Treatment considerations

Methods: Comprehensive literature review following a 29-year-old-female with no known psychiatric history presenting to the emergency department with mixed complaints of twin-pregnancy, menorrhagia, and concern for threatened abortion. Psychiatry was consulted for decisional capacity to leave against-medical-advice due to concerns for ectopic pregnancy. Patient reported a recent ultrasound with fetal heartbeat and sensation of fetal “kicks”. She was concerned the menorrhagia was threatening her pregnancy. The patient appeared irritable, paranoid, endorsed ideas of reference and a fixed false belief that she was pregnant with twins, despite quantitative HCG, abdominal and transvaginal ultrasounds being negative. On examination, while there was vaginal bleeding, there were no stigmata of pregnancy.

Results: Diagnosis- Delusion of Pregnancy.

Conclusions: Delusion of Pregnancy have been associated with polythematic content. Pseudocyesis may be confounded by conditions such as abdominal neoplasms, leiomyoma, and endocrinologic changes (eg- hyperprolactinemia). Potent D2R antagonists carry increased risk of hyperprolactinemia and subsequent galactorrhea which may paradoxically exacerbate misattributions of pregnancy. Careful consideration of psychotropic choice is therefore needed in the management of these conditions.

Disclosure: No significant relationships.

Keywords: Pregnancy; pseudocyesis; delusion of pregnancy; somatic symptom disorder

EPP0327

Mobile Ecological Tracking of mood as a predictor for resilience among male and female Israeli combatants

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Introduction: Background: Mental resilience refers to the capacity to overcome the negative effects of setbacks and associated stress on performance. In the face of stressors, lack of mental resilience may even cause psychopathology, such as depression. While all combatants are exposed to stressors, female combatants face additional challenges compared with their male counterparts. Resilience is often measured using retrospective self-reports, which do not consider ecological fluctuations across situations and environments. A mobile ecological momentary monitoring allowed us to study gender differences in factors contributing to resilience.

Objectives: Objective: We aimed to characterize gender differences in resilience trajectory in combatants using ecological momentary assessments (EMA).

Methods: Methods: 156 Combatants (98F, 58M) completed mood EMA daily for two weeks using a mobile app. In addition, resilience, QOL and mental health questionnaires were administered three times in four weeks. Stepwise regression models were used to predict resilience after 2-4 weeks.

Results: Results: Female combatants reported higher levels of anxiety and lower resilience, self efficacy and QOL, as well as higher mood variability over time ($t(149)=4.9, p<.0001$). In addition, while for females, baseline anxiety, self-efficacy and mood EMA all contributed to resilience prediction (37% of variance explained), baseline anxiety was the sole predictor for males (explaining 28% of variance).

Conclusions: Conclusion: Gender differences in resilience were found in combatants who participate in the same occupation. These results emphasize the importance of considering the inclusion smartphone-delivered EMA tools in QOL models.

Disclosure: No significant relationships.

Keywords: Gender differences; ecological momentary assessments; QOL; Basic military training

EPP0329

Clozapine placental passage at delivery: an update

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