Use Disorder (CUD) hold significant epidemiological and health implications. Emerging evidence suggests a co-occurrence between cannabis abuse, dependence and depression, though studies remain limited.

Objectives: To estimate the percentage of individuals with CUD who have comorbid MDD and those with MDD who have comorbid CUD.

Methods: PubMed, SciELO, and Google Scholar were searched using keywords: ((abuse, cannabis[MeSH Terms]) OR (cannabis dependence[MeSH Terms])) AND ((depressive disorder, major [MeSH Terms]) OR (depressive disorder[MeSH Terms])). Original articles in English or Portuguese were included. Data collection followed PRISMA, MOOSE guidelines, and JBI critical appraisal. The final sample included 53 articles: 36 for the first meta-analysis and 17 for the second. A heterogeneity test (Q test) and "leave-one-out meta-analysis" were used. Prevalence rates were aggregated using random-effects models. Meta-regression and sensitivity analyses were conducted.

Results: MDD showed a high prevalence among individuals with CUD, at 31.12% (95% CI: 25.71% to 36.80%). Prevalence was not significantly influenced by year, age, gender, population type, assessment period, region, or diagnostic criteria. CUD prevalence among those with MDD was 10.95% (95% CI: 7.08% to 15.53%), with higher rates in men and younger individuals. CUD prevalence appears to be increasing over time, though population type and assessment period did not significantly affect overall prevalence.

Conclusions: This meta-analysis reveals a high prevalence of MDD among individuals with CUD and a significant prevalence of CUD among those with MDD, confirming a strong comorbidity. Cannabis use may exacerbate depressive symptoms, while those with MDD are at higher risk of developing CUD. Age, gender, and geographical factors influence this relationship. With increasing cannabis use, particularly among younger populations, the CUD-MDD comorbidity presents a growing public health issue. Further research is needed to explore the longitudinal link between these disorders.

Disclosure of Interest: None Declared

EPV0005

Prevalence of depression and anxiety symptoms among first-generation medical students

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Introduction: Medical students face high demands in college, which may cause significant psychological stress and mental health problems, such as depression and anxiety. Several studies worldwide have shown that such individuals are more likely to experience anxiety. However, few studies have examined how generational status and being a first-generation medical student lead to mental health issues.

Objectives: In this study, we aimed to estimate the prevalence of depression and anxiety in first-generation medical students (FGMS) compared with non-FGMS and to determine the correlation between socioeconomic factors and other variables with depression and anxiety in FGMS.

Methods: This cross-sectional study was conducted among medical students at the College of Medicine. A self-administered questionnaire was distributed to the students using convenience sampling. The questionnaire comprised socio-demographic information (e.g. age, gender, marital status), a General Anxiety Disorder (GAD-7) scale to assess anxiety, and a Patient Health Questionnaire (PHQ-9) to assess depression among medical students.

Results: Among the 309 medical students who completed the questionnaire, 65.4% were female and 75.7% were FGMS. The prevalence of anxiety and depression among medical students was 36.2% and 39.5%, respectively, and was higher among FGMS, but not significantly different (p<0.05). Independent risk factors for anxiety and depression among FGMS included a previous history of mental disorders and lack of social and emotional support, while fair sleep quality was identified as a significant independent preventive factor for anxiety and depression. The prevalence rates of anxiety and depression among patients with FGMS were 39.3% and 41.9%, respectively. A previous diagnosis of mental disorder was a significant risk factor for anxiety and depression, whereas fair sleep quality was a significant protective factor. Further research is needed to identify the factors that influence anxiety and depression among FGMS in our region.

Conclusions: Anxiety and depression are common among first-generation medical students. FGMS with a history of mental disorders tended to exhibit symptoms of both anxiety and depression compared to the rest of the FGMS. However, satisfactory sleep quality could result in better mental condition in FGMS. Institutional measures should be adopted to help students improve their living conditions. Furthermore, institutional leaders should spearhead the destigmatisation of psychological disorders and advocate help-seeking behaviours when students need mental help, particularly when they are anxious or depressed.

Disclosure of Interest: None Declared

EPV0006

Is there a place for Psychosocial Rehabilitation in Alcohol Use Disorders? – A Retrospective Analysis of the profile of frequent Users of an Inpatient Alcohol Unit in Lisbon

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Introduction: Alcohol dependence is a chronic condition associated with multiple relapses, leading to recurrent admissions to inpatient units. The success of treatment is closely tied to the psychosocial rehabilitation of these patients, as a means to ensure long-term abstinence.

Objectives: We aim to characterize the psychosocial profile of frequent users of an Inpatient Alcohol Detoxification Unit in Lisbon and to reflect on the need for psychosocial interventions to prevent relapse risk.

Methods: A retrospective analysis of data collected from the clinical records of patients admitted two or more times within one year to