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Insomnia and psychological distress in lung cancer

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Introduction: The high symptom burden of lung cancer, coupled with the emotional strain of diagnosis and treatment, often leads to disrupted sleep patterns and heightened levels of anxiety and depression.

Objectives: The aim of this study was to assess the prevalence and severity of insomnia in patients with primary bronchopulmonary cancers, and to explore its relationship with anxiety and depression. Methods: This was a cross-sectional, descriptive and analytical study conducted among patients followed up for bronchopulmonary cancer at the palliative care unit in the pneumology and allergology department of the Hedi Chaker University Hospital in Sfax. The questionnaire used included patients' sociodemographic characteristics, clinical and treatment data. Sleep disturbance was assessed using the insomnia severity index (ISI) and psychological distress using the Hospital Anxiety and Depression Scale (HADS). Results: A total of 49 patients participated, with a mean age of 61,8 years, the majority being male (85,7%). The disease duration was less than one year in 61,2% of cases, and 59,2% of patients had stage IV lung cancer, with tumor progression observed in 32,7%. Mild to moderate insomnia affected 49% of the patients.

The mean anxiety score was 7,08 (SD = 3,6), with a prevalence of anxiety observed in 4,1% of patients. The mean depression score was 6,92 (SD = 3,4), and 34,7% of patients exhibited signs of depression.

A significant association was found between insomnia and depression (p=0,005), but no significant relationship was observed between insomnia and anxiety (p=0,14).

Conclusions: The relationship between sleep disturbance and psychological distress highlights the need for comprehensive management that addresses both physical symptoms and mental health in this population. Early identification and intervention for insomnia and depression in lung cancer patients may enhance their overall well-being and quality of life.

Disclosure of Interest: None Declared

EPV1184

Assessment of quality of life in lung cancer patients undergoing chemotherapy

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Introduction: Lung cancer remains one of the leading causes of cancer-related morbidity and mortality worldwide. Despite being a crucial treatment, chemotherapy often brings a range of side effects that can significantly impact the overall quality of life of the patients.

Objectives: To evaluate the quality of life (QoL) in lung cancer patients undergoing chemotherapy.

Methods: The sample consisted of 49 lung cancer patients undergoing chemotherapy at the Pneumology and Allergology Department of the Hedi Chaker University Hospital in Sfax. The questionnaire used included patients' sociodemographic characteristics, cancer and treatment data, and the European Organization for Research and Treatment of Cancer Core Quality of Life Questionnaire 30-item version (EORTC QLQ-C30).

Results: The mean age of the patients surveyed was 61,8 years, with a male predominance (85,7%). The most frequently reported functional signs of lung cancer were dyspnea (36,7%), cough (34,7%) and chest pain (20,4%). Disease duration was less than 1 year in 61,2% of the cases, and 59,2% were classified as stage IV. Tumor progression occurred in 32,7% of cases. Of the patients, 20,4% were on a single chemotherapy agent, while 79.6% were on a combination regimen.

According to QLQ-C30, the mean global QoL score was $61,24\pm24,5$ for the entire sample. Physical functioning and role functioning were the most affected on the functional scale, while fatigue and appetite loss were the most frequent symptoms.

Conclusions: The findings indicate that lung cancer patients undergoing chemotherapy experience significant challenges to their quality of life, particularly in physical functioning and symptom management. These results highlight the critical need for integrating routine QoL assessments into clinical practice to better address patients' needs and improve supportive care.

Disclosure of Interest: None Declared

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Delusional parasitosis secondary to vascular pathology in an oncological patient: case study

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Introduction: Delusional parasitosis is a psychotic disorder where individuals firmly believe they are infested with parasites despite no medical evidence. It can be primary or secondary, the latter being a symptom of other medical conditions like neurological diseases. Effective management requires collaboration between psychiatry and other specialties.

Objectives: The evaluation of each patient with an interdisciplinary team increases adherence to treatment in patients with cancer and psychiatric illness.

Methods: Clinical history, complementary studies, and review of the literature on the case of a 66-year-old woman subjected to multiple dermatological treatments due to a sensation of body infestation. History of type 2 diabetes and diabetic neuropathy since 2021. In 2022, she was diagnosed with stage IIIA luminal B