

suicide didn't express suicidal ideation on the previous interviews. Most effective measures to prevent suicide are environmental modifications and staff education approaches, giving appropriate responses to each patient's circumstances.

There is a paucity of literature on suicide in this setting. It should become a priority in national programs of Suicide Prevention.

Disclosure of Interest: None Declared

EPV1061

The impact of the OPRM1, OPRK1, DCC genes polymorphisms on the motivation for non-suicidal self-injury in young adults: a pilot study

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Introduction: Non-suicidal self-injury (NSSI) – the deliberate, self-directed damage of body tissue without suicidal intent and for purposes not socially or culturally sanctioned – is a highly prevalent phenomenon in adolescents and young adults. Motivation for the NSSI is known to be heterogenous in different patients. However, biological and especially genetic markers associated with different motivation for the NSSI have not been studied to date. One of the possible candidates are mu- (*OPRM1*) and kappa-opioid receptor (*OPRK1*) genes, since opioid system is known to be involved in the NSSI. Another perspective candidate is the *DCC* gene, encoding the netrin 1 receptor, which plays vital part in the formation of the prefrontal cortex.

Objectives: We conducted a pilot cross-sectional study to test the impact of the rs1779971 *OPRM1*, rs6473797 *OPRK1* and rs8084280 *DCC* gene polymorphisms on the characteristics and motivations for the NSSI in young adults.

Methods: 28 patients of European ancestry with NSSI (89,3%; n=25) women, median age (Q1-Q3) – 23 (21,25-25) years) were included in the pilot sample. The majority of the sample had a diagnosis of bipolar disorder (78,6%; n=20). Characteristics and motivation for the NSSI were measured by the Inventory of Statements about Self-Injury (ISAS). The Childhood Trauma Questionnaire (CTQ) was used to control for adverse childhood experiences, a potent environmental factor, associated with NSSI. Genotyping was performed using RT-PCR. The genetic effect was evaluated using the dominant model. For statistical analysis multiple linear regression with the presence of minor alleles, different types of childhood trauma, diagnosis, age and sex as factors and ISAS scores as dependent variables were used.

Results: Multiple linear regression showed that minor C allele of rs6473796 *OPRK1* gene polymorphism was associated with an increase of the "Affect regulation" (B=2,23; CI95% [0,39–4,06]; p=0,022), "Anti-dissociation" (B=3,31; CI95% [0,18–6,44]; p=0,039) subscales of ISAS scores. Moreover, the minor T allele of the rs8084280 *DCC* gene polymorphism was associated with a decrease of the "Affect regulation" subscale score (B=-1,74; CI95% [-3,30 – -0,18]; p=0,032).

Conclusions: To our knowledge, this is the first study on the genetic markers of motivations for NSSI. Our pilot results showed that,

controlling for diagnosis, age, sex and childhood trauma, *OPRK1* and *DCC* gene polymorphisms may be associated with the heterogeneity of motivations for NSSI. However, these results require confirmation on the larger samples.

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EPV1062

Impact of empathy level on nurses' attitudes toward a suicidal patient

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Introduction: The number of suicidal patients who are consulting hospitals is increasing. Therefore nurses are more frequently faced to dealing with these patients. Empathy plays an essential role in the nurse-patient relationship and influences therapeutic effectiveness.

Objectives: Assess the impact of empathy level and investigate its factors on psychiatric and emergency department nurses' attitudes toward a suicidal patient.

Methods: This is a cross-sectional analytical study that focused on nurses working in emergency and psychiatric departments in two Tunisian Hospitals. It was conducted between February and April 2022.

We used the Cognitive and Affective Empathy questionnaire (QCAE) to evaluate the empathy level.

Results: Our study involved 60 nurses with an average age of 35,23 and a sex ratio of 0.76. Forty-seven percent of the nurses feel pity for the suicidal person while 16.7% remain indifferent.

Fifty-seven percent of respondents believe that attempting suicide is primarily a sign of weakness and 45% believe that its a sign of suffering.

While dealing with a suicidal patient, 45% of caregivers choose to reassure family and friends while 6.7% prefer to call the police to investigate.

Among the nurses, 58.4% had an affective empathy score greater than or equal to 30 while 51.9% of them had a cognitive empathy score greater than or equal to 40.

There was no statistically significant association (p>0.05) between the QCAE score and: age, gender, marital status, number of years in current service, number of children, and personal psychiatric history.

There is a significant association between The department and both emotional Contagion and Perspective taking (p<0.05), while no significant association between Proximal Responsiveness, Peripheral Responsiveness, and Online Simulation.

Conclusions: It is undeniable that empathy level affects the quality of the relationship between suicidal patients and caregivers with many influencing factors.

The nurse has a therapeutic role but also a preventive one with regard to the problem of suicide, Therefore, the training of medical and paramedical teams is essential in order to limit any negative attitudes.

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