

reported by 23.7% of participants, and 21.3% had a documented history of psychiatric disorders. Health-related anxiety was observed in 21.9% of participants and was significantly associated with a history of family member hospitalization for a serious illness ( $p < 0.05$ ). Regarding cyberchondria, 35.5% of participants reported low levels, 43.2% moderate levels, 20.1% high levels, and 1.2% very high levels. High levels of cyberchondria were significantly associated with higher health anxiety scores ( $p < 0.001$ ).

**Conclusions:** The findings suggest a moderate to high prevalence of cyberchondria among clinical medical students, with a strong association between higher cyberchondria scores and increased health-related anxiety. Interventions to reduce cyberchondria should focus on managing health anxiety and mitigating the negative impact of online health information

**Disclosure of Interest:** None Declared

## EPV0145

### Suppressing Health-Related Thoughts: A Pathway to Increased Anxiety?

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**Introduction:** Health-related anxiety, characterized by excessive worry about one's health, often leads to significant distress and impairment. Thought suppression, the conscious attempt to control or avoid unwanted thoughts, is frequently associated with various psychological conditions, including anxiety disorders. Research suggests that individuals with anxiety may attempt to suppress thoughts related to their fears, potentially exacerbating symptoms.

**Objectives:** The present study investigates the relationship between thought suppression and health-related anxiety, exploring how the tendency to suppress intrusive thoughts may influence health anxiety levels.

**Methods:** A cross-sectional survey design was employed, with participants drawn from a sample of medical students. The White Bear Suppression Inventory (WBSI) was used to assess the extent to which participants tend to suppress intrusive thoughts, while the Health Anxiety Inventory (HAI-18) was used to measure health-related anxiety. The HAI-18 evaluates the frequency and intensity of health-related worries and behaviors over the past six months.

**Results:** The study recruited 213 medical students, of which 74.2% were female. The mean age of participants was  $22.11 \pm 2$  years. Among the sample, 22.1% had a personal medical history, and 20.2% had a documented history of psychiatric disorders. Regarding family medical history, 59.6% of participants reported a familial history of medical conditions, and 21.6% reported a familial history of psychiatric disorders. Additionally, 39% of participants had family members who had been hospitalized for serious illness.

Health-related anxiety was observed in 26.3% of participants. A significant positive correlation was found between WBSI scores (thought suppression) and HAI scores (health-related anxiety) ( $r = 0.301$ ,  $p < 0.001$ ), suggesting that participants who reported higher levels of thought suppression were more likely to experience health-related intrusive thoughts and heightened anxiety about their health. Furthermore, individuals with higher health anxiety tended

to have a stronger inclination to suppress thoughts, compared to those with lower levels of health anxiety.

**Conclusions:** The findings indicate a positive relationship between thought suppression and health-related anxiety among medical students. Specifically, students who engage in higher levels of thought suppression tend to report more frequent intrusive thoughts related to health and greater anxiety about their well-being. Future research could explore interventions aimed at reducing thought suppression as a potential strategy for alleviating health anxiety.

**Disclosure of Interest:** None Declared

## EPV0146

### The Impact of Thought Suppression on Cyberchondria

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**Introduction:** Cyberchondria, defined as excessive and anxiety-driven health-related internet searching, has become an increasingly significant issue in the digital age, where easy access to online health information can contribute to heightened health anxiety. Recent studies suggest that cognitive avoidance strategies, such as thought suppression, may worsen anxiety-related behaviors, including health-related internet searching.

**Objectives:** The objective of this study was to investigate how the tendency to suppress thoughts (thought suppression) influences the development and intensity of cyberchondria in a sample of medical students.

**Methods:** A cross-sectional study design was employed, involving a sample of 213 medical students. The White Bear Suppression Inventory (WBSI) was used to assess participants' tendency to suppress health-related thoughts. The Cyberchondria Severity Scale (CSS) was used to measure the extent and severity of health-related internet searching behaviors. Participants also provided information about their medical history, family medical history, and psychiatric background.

**Results:** The sample consisted predominantly of females (74.2%), with a mean age of  $22.11 \pm 2$  years. Among the 213 participants, 22.1% reported a personal medical history, and 20.2% had a documented history of psychiatric disorders. Regarding family medical history, 59.6% of participants reported a familial history of medical conditions, and 21.6% reported a familial history of psychiatric disorders. Additionally, 39% of participants reported that family members had been hospitalized for serious illness.

The levels of cyberchondria among participants were as follows: 36.6% of participants reported low levels of cyberchondria, 41.8% reported moderate levels, 20.7% reported high levels, and 0.9% reported very high levels of cyberchondria.

A significant positive correlation was found between WBSI scores (measuring thought suppression) and Cyberchondria Severity Scale (CSS) scores (measuring health-related internet searching) ( $r = 0.4$ ,  $p = 0.02$ ). This suggests that medical students who engaged in higher levels of thought suppression were more likely to experience intrusive health-related thoughts and engage in heightened online health searching behaviors.