Image 1:

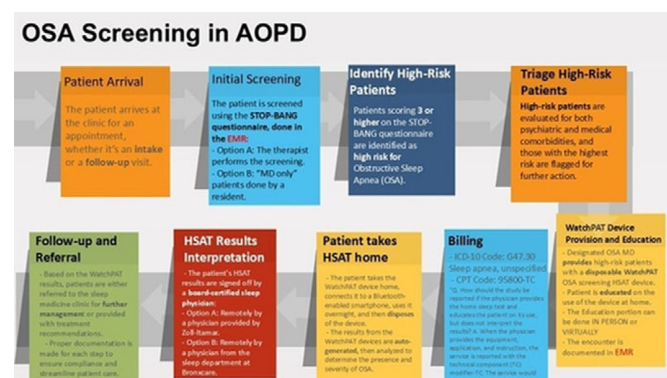**Conclusions:** Early findings from this Quality Improvement project suggest that integrating Obstructive Sleep Apnea screening into psychiatric outpatient care is feasible and beneficial. By identifying at-risk patients and providing accessible, at-home diagnostic tools, we aim to enhance patient care and address the underdiagnosed issue of sleep disturbances in psychiatric populations. The project demonstrates the potential for a streamlined, interdisciplinary approach to improve outcomes and set a scalable model for comprehensive patient management in similar settings. Further analysis will focus on the impact of this intervention on psychiatric care and overall patient health outcomes.

Disclosure of Interest: None Declared

EPV1923

Narcolepsy and the Risk of Pregnancy Complications: Based on a Nationwide Healthcare System Database in South Korea

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doi: 10.1192/j.eurpsy.2025.2334

Introduction: Narcolepsy is known as an autoimmune disease which altered metabolic functions. It is believed that narcolepsy makes more pregnancy complications. However clinical evidence in narcolepsy patients, especially in pregnant women, is limited.
Objectives: We aim to find out whether there is relationship between narcolepsy and pregnancy complications.
Methods: We examined data from the South Korean nationwide health insurance claims database from 2010 to 2019. Out study included women narcolepsy patients who gave birth, and age- and sex- matched controls without narcolepsy. We estimated the odds ratio of narcolepsy with pregnancy complications and control group with pregnancy complications using multivariate logistic regression analysis.
Results: Our study included 1,836 women with narcolepsy who gave birth and 28,796 women who gave birth without narcolepsy. We found that women with narcolepsy have a slightly high risk of preterm birth (OR, 1.191; 95% CI, 1.034-1.372). Patients with

narcolepsy were at a significantly lower risk of spontaneous abortion, caesarean and gestational diabetes (OR, 0.763; 0.682-0.854, OR, 0.679; 95% CI, 0.560-0.824 and OR, 0.656; 95% CI, 0.556-0.774, respectively).
Conclusions: This study is the first study about pregnancy complications in narcolepsy patients in South Korea. We found that preterm birth happened more in the patient with narcolepsy during pregnancy. But patient had lower risk of spontaneous abortion, caesarean, gestational diabetes compared to heath control group. These findings suggest that narcolepsy is not a definite risk factor for pregnancy complications. Further research is needed to investigate the reasons why narcolepsy patients had lower risk of spontaneous abortion, caesarean, gestational diabetes compared to health control.

Disclosure of Interest: None Declared

EPV1928

Sleep phenotypes and mental disorders: analysis of causality with two-sample Mendelian randomization

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doi: 10.1192/j.eurpsy.2025.2335

Introduction: Sleep health is s an essential aspect of a healthy lifestyle, and sleep problems are prevalent among individuals with mental disorders. However, this relationship appears complex to explore with classic observational studies, due to bidirectional effects and residual confounding. Additionally, the different measures of sleep quality and the diversity of mental disorders make comprehensive assessment challenging.
Objectives: In the current study, we aimed at investigating the causal relationship between six sleep factors, derived from twelve indicators, and thirteen mental disorders. Specifically, we examined the impact on Alzheimer disease, attention-deficit and hyperactivity disorder (ADHD), anorexia nervosa, anxiety disorder, autism spectrum disorder, alcohol use disorder, bipolar disorder (BD), cannabis use disorder (CUD), major depressive disorder, obsessive-compulsive disorder, post-traumatic stress disorder, suicide attempt, and schizophrenia (SZ).
Methods: Using Genomic Structural Equation Modeling, we estimated genome-wide associations for six sleep factors in the UK Biobank. Next, we examined bidirectional causal relationships with mental disorders in the Psychiatric Genomics Consortium, using Two-sample Mendelian Randomization (MR). Results are presented as inverse-variance weighted betas (B) with 95% confidence intervals (95%CI), representing log-odds for sleep-to-mental disorder causality (forward MR) and linear regression coefficients for mental disorder-to-sleep causality (backward MR).
Results: Our investigation confirmed previous evidence of a six-factor model of sleep, comprising alertness (AF), circadian preference (CPF), efficiency, duration (DF), regularity, and insomnia (IF). MR analyses showed bidirectional causal relationship between IF and ADHD (B:0.747[95%CI:0.392;1.10] and B:0.029[95% CI:0.020;0.040] for forward and backward, respectively). Unidirectional causal effects were found for BD on AF (B:-0.113[95%CI:-0.153;-0.072]), SZ on AF (B:-0.057[95%CI:-0.077;-0.037]), BD on