

Conclusions: There was inverse correlation between resilience scores and depression, anxiety, and post-traumatic stress symptoms. Resilience should be considered in studies involving trauma population.

Disclosure: No significant relationships.

Keywords: Anxiety; Depression; resilience; Post-traumatic stress disorder

EPV1018

Transcranial magnetic stimulation and post-traumatic stress disorder

N. Moura^{1*}, A. Fraga², J. Facucho-Oliveira², F. Azevedo^{1,3}, C. Laginhas¹ and D. Esteves-Sousa²

¹Centro Hospitalar Lisboa Ocidental, Psychiatry, Lisbon, Portugal;

²Hospital de Cascais, Psychiatry, Alcabideche, Portugal and ³Centro Hospitalar de Lisboa Ocidental, Psychiatry, Lisbon, Portugal

*Corresponding author.

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Introduction: Post-traumatic stress disorder (PTSD) is a psychiatric disorder characterized by symptoms from four clusters after exposure to a traumatic event: re-experiencing symptoms including flashbacks and nightmares, hyperarousal, avoidance of internal and external stimuli related to trauma, and negative alterations in mood and cognition. As a noninvasive intervention that uses induction of electromagnetic fields to modulate cortical circuitry, TMS has a substantial body of literature demonstrating safety, tolerability, and efficacy in depression and potentially PTSD.

Objectives: Our aim is to perform a non-systematic review of the literature regarding TMS and PTSD

Methods: A semi-structured review was conducted on Pubmed concerning TMS and PTSD

Results: The majority of studies utilize repetitive TMS targeted to the right dorsolateral prefrontal cortex (DLPFC) at low frequency (1 Hz) or high frequency (10 or 20 Hz), however others have used alternative frequencies, targeted other regions, or trialed different stimulation protocols utilizing newer TMS modalities such as theta-burst TMS (TBS). It is encouraging that were positive outcomes have been shown, and often sustained for up to -3 months, nevertheless there is a paucity of long-term studies directly comparing available approaches.

Conclusions: TMS appears safe and effective for PTSD, although important steps are needed to operationalize optimal approaches for patients.

Disclosure: No significant relationships.

Keywords: PTSD; TMS

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Quality of life in midwives after post-traumatic stress disorders

I. Sellami^{1*}, A. Feki², R. Masmoudi³, K. Hammami¹, J. Masmoudi⁴, M.L. Masmoudi¹ and M. Hajjaji¹

¹Hedi Chaker university hospital, Occupational Medicine, Sfax, Tunisia; ²medecine university of Sfax, Rheumatology, Sfax, Tunisia;

³HEDI CHAKER hospital, Psychiatry Department, SFAX, Tunisia and

⁴CHU Hedi CHaker hospital Sfax Tunisia, Department Of Psychiatry (a), Sfax, Tunisia

*Corresponding author.

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Introduction: Post-traumatic stress disorder frequently alters the quality of life.

Objectives: Assess the quality of life in midwives who have post-traumatic stress disorder.

Methods: We conducted a cross-sectional study among midwives in a single university hospital centre using a self-administered questionnaire. We screened post-traumatic stress disorder using the Impact of event scale and the quality of life using 5 items Likert scale.

Results: Our response rate was 82%. Out of 42 midwives who answered us, 18 had post-traumatic stress disorder symptoms (42.8%). They were all female. Their mean age was 45.6 ± 10.3 years. The traumatic event occurred mainly at work and was related to the death of a mother or a baby. Symptoms of post-traumatic stress disorder symptoms were severe in 5 midwives. The quality of life was altered in 38.8% of participants. Both post-traumatic stress disorder symptoms and alteration of the quality of life were more frequent in patients who don't have leisure activities.

Conclusions: In conclusion, midwives are vulnerable to developing post-traumatic stress disorder. Encouraging sports and other leisure activities may protect them from having severe repercussions on their life.

Disclosure: No significant relationships.

Keywords: post traumatic stress disorder; midwives; Quality of Life

EPV1022

Dealing with Posttraumatic Nightmares

C. Alvarez Garcia*, L. Nocete Navarro and A. Sanz Giancola

Hospital Universitario Príncipe de Asturias, Psychiatry, Alcalá de Henares, Spain

*Corresponding author.

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Introduction: Posttraumatic nightmares are one of the most frequent symptoms in posttraumatic stress disorder. Prevalence can be up to 96%. These nightmares evoke the experienced traumatic event, causing a negative impact. Besides, they are and independent risk for suicide. There are different pharmacological and non-pharmacological options for PTN, despite is no optimal treatment.

Objectives: To analyse the different treatment options for PTN.

Methods: This was a narrative literature review.

Results: The two main treatments for PTN nowadays are the Imagery Rehearsal Therapy (IRT) and prazosin. IRT is a cognitive-behavioral intervention, that helps the patient to change the content of the nightmare to a "happier ending". Prazosin is an alpha-adrenergic receptor antagonist that blocks the stress response in the central nervous system receptors. Although it was a promising drug, significant differences compared to placebo have not been found. There is growing data that suggests nabilone, a synthetic cannabinoid, could be helpful in PTN treatment. A clinical trial made in Canada revealed that 72% of patients experienced a complete disappearance or at least an important reduction of PTN.

Conclusions: PTN is a very common and distressing symptom in patients presenting PTSD. Nevertheless, there is no treatment with enough evidence for this pathology. On this account, it is fundamental to do more research in order to find and suitable treatment that can improve the quality of life of these patients.

Disclosure: No significant relationships.

Keywords: nightmares; posttraumatic; Treatment; PTSD