S720 E-Poster Viewing

**Conclusions:** The case confirmed the importance of recognizing physical symptoms in a psychiatric context to avoid severe complications and the impact of multidisciplinary assessment.

Disclosure of Interest: None Declared

## **Epidemiology and Social Psychiatry**

## **EPV0787**

# Schizophrenic patient's preference for long-acting injectable antipsychotics in Saudi Arabia

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doi: 10.1192/j.eurpsy.2025.1460

**Introduction:** recognizing their potential impact on patients preferences towards antipsychotic treatment can guide the development of personalized and culturally sensitive treatment approaches. Gaining insight into patients' preferences regarding long-acting injectable versus oral antipsychotics has the potential to alleviate barriers to LAI utilization in schizophrenia treatment. Therefore, we aimed to identify whether patients with schizophrenia prefer LAI or oral antipsychotics in Saudi Arabia.

**Objectives:** Gaining insight into patients' preferences for long-acting injectable (LAI) antipsychotics could aid in mitigating potential barriers to the utilization of LAI in patients with schizophrenia

**Methods:** A cross-sectional descriptive study was conducted among schizophrenic patients in Saudi Arabia between June 2023 and October 2023. An analysis was conducted on the responses obtained from the Medication Preference Questionnaire.

Results: There was a subtle trend toward favouring oral antipsychotics over LAIs. Patients on oral antipsychotics commonly favoured the following outcomes: "I don't have to worry about taking medicines" (77%), "I can get back to my favourite activity" (71%), and "I feel symptoms will not come back" (65%). Most patients favoured gluteal injections over deltoid injections for the following reasons: easier use (90%), improved symptom relief (73%), lesser side effects (73%), and reduced pain (73%). Overall, 65% of patients favoured the dose once per month as opposed to three times per month (18%) or daily (17%). The common reasons cited by patients who favoured a 1-monthly dose were "less medication-related conflict" (97%) and "dislike to taking too much medication at once (93%)."

Conclusions: This study unveiled the presence of a subtle differentiation between LAI antipsychotics and oral antipsychotics in terms of their relative desirability, with a slight inclination toward an increased preference for oral medications. Patients with schizophrenia favoured the gluteal injection over the deltoid injection on account of its greater ease of use, efficacy in symptom relief, absence of adverse effects, and reduced discomfort. Furthermore, patients exhibited a greater inclination towards monthly LAI in comparison to 3-monthly LAI and oral pill antipsychotics.

Disclosure of Interest: None Declared

### **EPV0789**

# Psychosocial risk factors among nurses at Sahloul University Hospital in Sousse (Tunisia)

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doi: 10.1192/j.eurpsy.2025.1461

**Introduction:** Nursing staff occupy a profession that requires significant mental, emotional, and affective demands. These caregivers are particularly vulnerable to psychosocial risks that can have significant impacts on their mental and physical health, as well as on the quality of care they provide.

**Objectives:** To describe the psychosocial risk factors at work among nurses at SAHLOUL university hospital.

**Methods:** This is a descriptive cross-sectional study conducted among the nursing staff of SAHLOUL university hospital. Data was collected using a self-administered questionnaire. Data analysis was performed using SPSS 26 program.

**Results:** A total of 95 nurses participated in the study. Almost all the nurses surveyed (95.8%) reported that their work constitutes a significant mental load. More than one-third of respondents (34.7%) frequently faced cases of death during their work. Most of the nurses surveyed (93.7%) felt demotivated regarding their work. Just over half of the nurses surveyed (51.6%) reported having been victims of a violent situation from a patient during their professional career. Regarding the results relative to the Karasek scale, we note that our population tends to utilize skills more than to be autonomous (35.56 vs. 34.36). Social support is generally low among our study population with an average score of 25.37±2.57. Conclusions: There is psychosocial, and particularly professional, repercussions on the psychological state of healthcare personnel, which means that care workers' mental health needs to be addressed. Occupational health services must detect the suffering of care workers and improve the psychosocial environment.

Disclosure of Interest: None Declared

#### **EPV0790**

# Burden assessment in caregivers of patients with schizophrenia

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doi: 10.1192/j.eurpsy.2025.1462

**Introduction:** The role of caregiver of patients with schizophrenia is associated with an increased risk of adverse mental and physical health outcomes.

**Objectives:** assess the severity of the burden in caregivers of patients with schizophrenia as well as to determine the factors associated with a high burden with the overall goal of improving the quality of life of caregivers of patients with schizophrenia.

**Methods:** This is a descriptive mono-centric cross-sectional study with an analytical aim carried out during the period March-April

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2022 on 80 caregivers of schizophrenia patients followed up at the psychiatric consultations of the University Hospital of Mahdia. The evaluation of the burden experienced by the caregiver was carried out using the "SCQ" Schizophrenia Caregiver Questionnaire Version 1.0.

**Results:** The average age of the caregivers was 57.1 years with 54% of them being male. 71% of the caregivers were married with 81% of them being educated and 19% being illiterate. 45% of the caregivers were still active with 58% of them having an average socioeconomic level. Parents represented 59% of caregivers, siblings 29% and spouses 14%. They lived with the patients in 96% of cases and took care of another family member in 37.5% of cases. 89% of the caregivers were taking care of the patients for a period of more than 5 years and in 77.5% of the cases, these caregivers requested specialized help. 75% of patients were completely dependent on the caregiver.

37.5% of caregivers had a severe level of burden. Four factors were found to be predictive of severe burden: low education level of the caregiver, low socioeconomic level of the caregiver, violent and aggressive behaviors of the patient, and degree of dependence of the patient (p<0.05).

**Conclusions:** Being a caregiver of a patient with schizophrenia is correlated with a great burden and deterioration of quality of life, hence the importance of assessing this burden, determining the initiating and aggravating factors as well as developing well-defined strategies for these caregivers in order to alleviate this burden and improve their quality of life.

Disclosure of Interest: None Declared

### **EPV0791**

# Predictive Factors of Treatment-Resistant Schizophrenia

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doi: 10.1192/j.eurpsy.2025.1463

**Introduction:** Schizophrenia is a complex, chronic psychiatric disorder marked by disruptions in thought processes, perception, social interactions, and emotional regulation. Despite various therapeutic options, 20–34% of patients develop treatment-resistant schizophrenia (TRS)<sup>1</sup>, a condition associated with a poor prognosis and significant challenges in clinical management. Early identification of predictive factors for treatment resistance may enable more targeted interventions, ultimately improving patient outcomes by allowing for tailored treatment approaches.

**Objectives:** This study aims to identify early predictive factors for the progression to TRS, differentiate modifiable from non-modifiable factors, and determine prognostic indicators for schizophrenia. The goal is to facilitate early intervention for high-risk cases and prevent TRS by targeting modifiable factors.

**Methods:** This is a descriptive and an analytical retrospective study including patients diagnosed with TRS according to NICE criteria, treated with Clozapine, and hospitalized at the Ar-Razi Psychiatric Hospital in Salé between 2022 and 2024. Included cases meet specific criteria, such as complete clinical records and the need for Clozapine treatment, with no age restrictions. Sociodemographic, clinical, evolutionary, and therapeutic data are collected using Excel and analyzed using SPSS 20 software.

**Results:** Among the 126 TRS cases included, several risk factors were identified. Non-modifiable factors include age, family history, and the presence of negative symptoms, while modifiable factors include the duration of untreated illness and certain comorbidities. **Conclusions:** The results of this study provide valuable insights into risk factors associated with TRS and guide specific management and prevention strategies for this subgroup of schizophrenia patients.

Disclosure of Interest: None Declared

### **EPV0792**

## A systematic review of dietary changes after migration in women: a focus on schizophrenia

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**Introduction:** The impact of migration on cardiovascular risk factors have been reported to be gender-specific. Obesity and cardiovascular disease are increased in those who migrate to Western countries.

**Objectives:** Our aim is to investigate changes in the dietary habits of women after migration, especially in schizophrenia women.

**Methods:** A systematic review was performed in PubMed, Scopus and PsycINFO databases from inception to October 2024 according to the PRISMA statement. Search terms: (diet OR food OR "dietary acculturation") AND migration AND women. Studies were included if they were focused on dietary changes after migration in women. In a second step, we conducted electronic searches to find additional papers on schizophrenia.

**Results:** A total of 2046 records were screened, of which 36 studies were included.

- (1) Socio-clinical scenarios of migration: a)Latin-American (n=5), b)African (n=7), c)Asian (n=17), Europe (n=2). Results: Weight gain after migration to developed countries, reduced dietary diversity and limited access to culturally appropriate foods are common (poor traditional-food trajectories). Early stages of migration are critical. Model of dietary transition during pregnancy (3 stages) and risk of gestational diabetes.
- (2) Transnational migration (rural-urban, n=5). Indian women had higher intakes of both fruit and vegetables and fat. Migration from rural-to-urban and urban-to-urban areas was associated with obesity risk. Exception: rural migrants to Mongolia's capital maintaining traditional lifestyles. Few studies focus on women with schizophrenia.