

Image 1:

Prevalence	N=52(100%)
<b>Number of tattoos</b>	
1	22(42%)
2-5	24(47%)
>5	6(11%)
<b>Age of first tattoo</b>	
<18 years	8(16%)
18-22	16(30%)
22-25	18(35%)
>25 years	10(19%)
<b>Size of tattoos</b>	
Small<5cm	32(61,5%)
5-15cm	16(30,8%)
Big >15cm	4(7,7%)
<b>Motivation(s) for tattooing</b>	
Individuality	38,5%
Coping mechanism	16(30,8%)
Sexuality	0(0%)
After a life event	46,2%
Couple life	4(7,7%)
Other	6(11,5%)
<b>Feelings towards tattoos</b>	
Regret	6 (11,5%)
Neutral	26(50%)
Proud	18(34,6%)
Other	2(3,9%)
<b>Desire to remove</b>	
Yes	5(15,4%)
No	47(84,6%)

Image 2:

Prevalence	N=52(100%)
<b>History of psychiatric consultation</b>	
Yes	22(42,3%)
No	30(57,7%)
<b>Psychiatric diagnosis</b>	
Yes	8(15,4%)
Bipolar disorder	2(3,8%)
Depression	2(3,8%)
Anxiety disorder	1(1,9%)
Substance use disorder	1(1,9%)
Borderline personality	2(3,8%)
<b>Psychiatric medication</b>	5(9,6%)

**Conclusions:** Tattooing is a means of expression and a form of body modification, rich in cultural and personal significance, with a dual affiliation to tradition and modernity. It is highly prevalent among women, and has implications for both mental and physical health.

**Disclosure of Interest:** None Declared

## EPV2061

### Factors affecting psychological distress or quality of life, and association between psychological distress and quality of life in Korean infertile women

H. Suh<sup>1\*</sup> and S. Kim<sup>2</sup>

<sup>1</sup>Psychiatry, CHA University, School of Medicine and <sup>2</sup>Obstetrics and Gynecology, Fertility Center of CHA Gangnam Medical Center, CHA University School of Medicine, Seoul, Korea, Republic Of

\*Corresponding author.

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**Introduction:** Infertile patients are more likely to experience psychiatric illnesses than fertile patients, therefore it is important to have early intervention for psychiatric illnesses in infertile patients.

**Objectives:** This study aimed to determine the clinical factors affecting psychological distress and quality of life (QoL), and investigate the association between psychological distress and QoL in infertile women.

**Methods:** This was a prospective cohort study of 100 infertile women who voluntarily agreed to participate at their first visit from November 2018 to May 2019. Psychological distress and QoL were evaluated using the 2 questionnaires (SCREENIVF and FertiQoL) specifically designed for infertility.

**Results:** The prevalence screening positive for anxiety and depression risk were 42% and 29%, respectively. The number of miscarriage and *in vitro* fertilization (IVF) treatments were significantly associated with helplessness risk factor. Furthermore, women with 2 or more IVF treatments had lower emotional, and mind/body QoL domain scores than women with less than 2 IVF treatments. Regarding the association between the levels of psychological distress and QoL in infertile women, the largest association was observed between helplessness risk factor and mind/body QoL domain ( $r=-0.795$ ,  $p < 0.001$ ). Patients with more risk factors for psychological distress had the worse emotional, and mind/body QoL domain scores.

**Conclusions:** The levels of psychological distress were significantly associated with QoL in infertile women. These psychologically vulnerable infertile women may receive psychological evaluations and interventions from various angles with conventional treatments for infertility.

**Disclosure of Interest:** None Declared

## EPV2062

### Attentional skills following traumatic brain injuries in elite female athletes

N. Syrmos<sup>1</sup>

<sup>1</sup>Aristotle University, Thessaloniki, Greece

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**Introduction:** Traumatic brain injuries are serious traumatic situations

**Objectives:** Aim of this study was to evaluate the attentional skills in cases with traumatic brain injuries, in elite female athlete

**Methods:** 3 female elite athletes (1 basket ball player, 1 runner and 1 ping pong player ) were participated in this study, 60 days more or little less after cervical spine injuries. Range of age 25-35 years and mean age 29.

We used specific performance tests, letter cancellation exam, naming trials and iq tests.

**Results:** All of them(3,100%) reported deficits in all areas of attention function and also cognitive and emotional status.2 of them (66%) reported also difficulty in complex task activities, especially when time limits were imposed.

**Conclusions:** All these exams are good and efficient tools in order to evaluate this kind of patients.

**Disclosure of Interest:** None Declared

## EPV2064

### Women, Gender and Mental Health: What factors help mentally ill birth mothers navigate Child Welfare Services during the perinatal period?

H. L. A. C. R. Wanigasekera<sup>1\*</sup> and A. Buist<sup>2</sup>

<sup>1</sup>Psychiatry, Austin Health and <sup>2</sup>Psychiatry, University of Melbourne, Melbourne, Australia

\*Corresponding author.

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**Introduction: Women, Gender and Mental Health: What factors help mentally ill birth mothers navigate Child Welfare Services during the perinatal period?**

**Chamali Wanigasekera**<sup>1</sup> MBBS, AMC, MPsych, FRANZCP

**Anne Buist**<sup>1,2</sup> MBBS, MMed, MD, FRANZCP

1. Austin Health, Heidelberg, Victoria, Australia

2. University of Melbourne, Victoria, Australia

Email: [Chamali.WANIGASEKERA@austin.org.au](mailto:Chamali.WANIGASEKERA@austin.org.au); [a.buist@unimelb.edu.au](mailto:a.buist@unimelb.edu.au)

**Background:** Mental Illness is common in the perinatal period. Given the dependency of infants, additional factors such as lack of support, family violence and comorbid drug use may place the infant at significant physical and psychological harm. Anecdotal information suggests that many of these women do not receive adequate support during the perinatal period. However, the factors that predict and protect families, enabling them to stay together and function in a “good enough” manner, remain unclear.

**Objectives: Aims:** To review the current literature examining protective service involvement in the women who present with mental illness in the perinatal period.

**Methods:** A systematized review of the literature was conducted through a comprehensive search of databases for psychosocial and medical research (MEDLINE, PsycINFO, Embase, Emcare, Cochrane Library) and a targeted search of the grey literature to select the relevant studies that meet the inclusion criteria. Original papers were included if they were written in English and published before September 1, 2022. Sixteen studies were selected for inclusion.

**Results:** Protective and predictive factors that help mentally ill mothers to continue as primary caregivers will be presented. The

factors that determine risks for child protective involvement and child removal in mothers with mental illness are also discussed.

**Conclusions:** The results of this research will provide recommendations on how to deliver sensitive perinatal mental health care for mothers already involved with the Child Welfare Services, aiming to minimize child removal.

**Disclosure of Interest:** None Declared

## EPP342

### Anxiety and depression in women cycling naturally and taking oral contraceptives – a daily diary study

M. Kowalczyk<sup>1\*</sup>, M. Kornacka<sup>2</sup> and I. Krejtz<sup>1</sup>

<sup>1</sup>Psychology, SWPS University, Warsaw and <sup>2</sup>Psychology, SWPS University, Katowice, Poland

\*Corresponding author.

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**Introduction:** While the literature is inconsistent about the link between anxiety and oral contraceptives (OC) (Beltz FIN 2022; 67) the link between depression and OC is recognized in women who started taking OC during adolescence (Skovlund *et al.* JAMA Psychiatry 2016; 73). The review by Beltz gives many indications on how to conduct studies on these topics in a more reliable manner as there are a lot of variables to consider, such as assessing the exact phases of the menstrual cycle, comparing the active and inactive phases of OC or considering the types of OC. Other limitations described in the review are a lack of longitudinal studies and small sample sizes. The present study tried to take into account as many of these variables as possible.

**Objectives:** Our study aimed to understand the differences between women taking OC and naturally cycling (NC) women regarding their daily levels of anxiety, depression, protective factors (self-esteem and daily satisfaction with life), perseverative cognition (worry and perseverative thinking) and stress.

**Methods:** 89 women (48 – OC; 41 – NC) participated in a daily diary study in which they completed an online diary for 15 days divided into 3 phases of the menstrual cycle: menstruation, follicular and luteal. The women using OC were further classified according to the androgenicity of their OC: androgenic progestins are derived from testosterone while anti-androgenic progestins block androgen receptors (Raudrant & Rabe Drugs 2003; 63).

**Results:** There were no differences between groups in daily levels of anxiety, perseverative cognition, and stress. However, anti-androgenic OC users had higher levels of daily depression than NC women in all the phases of the menstrual cycle while androgenic OC users had higher levels of depression than NC women in the menses and follicular phases. Both groups of women taking OC had lower levels of daily self-esteem than NC women in all phases of the menstrual cycle. Androgenic OC users had higher daily satisfaction with life than anti-androgenic OC users in two phases.

**Conclusions:** Our study found differences between groups in daily levels of depression and protective factors linked with it, namely self-esteem and satisfaction with life. Overall, OC users had higher levels of depression and lower levels of self-esteem than NC women. However androgenic OC users had higher daily satisfaction with life than anti-androgenic OC users. We believe that our study has contributed to the literature by conducting a longitudinal assessment of anxiety and depression on a daily level by comparing NC