

understanding of post-COVID-19 mental health disorders in the study cohort.

Results: Preliminary findings are expected to provide valuable insights into the occurrence and connections of post-COVID-19 mental health disorders among Tirana's adult population. Statistical analyses will identify potential risk factors, informing the development of interventions. Robust data presentation will enhance the credibility and applicability of the study outcomes.

Conclusions: This study promises to elucidate the public health implications of post-COVID-19 mental health disorders in Tirana, guiding targeted interventions. Recommendations based on study findings aim to strengthen mental health services and implement tailored interventions, addressing the unique needs of the community.

Main Messages: Assessing post-COVID-19 mental health disorders in Tirana informs targeted interventions.

Study findings guide public health actions to enhance mental health services in the community.

Key words: Post-COVID-19 mental health disorders; Tirana; community mental health center

Disclosure of Interest: None Declared

EPP157

Mental Well-being of Medical Students in the Visegrad Four Countries: A Cross-Sectional Exploratory Study

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Introduction: The mental health of medical students is a critical concern, as their well-being directly influences academic performance and the overall success of educational institutions. The high academic demands, heavy workload, and emotional stress encountered by medical students can lead to significant mental strain, potentially resulting in mental disorders. Understanding these factors is essential for developing effective support mechanisms.

Objectives: This study aimed to investigate the mental well-being of medical students across the Visegrad Four countries (Hungary, Czech Republic, Poland, Slovakia) by identifying key predictors of well-being and categorizing students into well-being clusters based on psychological and physical health indicators.

Methods: A cross-sectional exploratory study was conducted using an anonymous, English-language online questionnaire. The survey gathered general demographic data, health-related information, and academic attitudes. Mental well-being was assessed using the Warwick-Edinburgh Mental Well-being Scale (WEMWBS), coping strategies were evaluated with the Brief COPE inventory, and somatic symptoms were measured using the Patient Health Questionnaire-15 (PHQ-15). Regression analysis was performed to identify predictors of mental well-being, and a two-step cluster analysis was employed to classify students into distinct well-being groups.

Results: A total of 1,703 medical students (467 males) participated in the study. Regression analysis identified adaptive problem-focused and emotion-focused coping, social support, satisfaction with the university experience, healthy eating habits, and a sense of control over personal health as positive predictors of mental well-being. In contrast, maladaptive coping strategies (avoidant and

passive) and frequent somatic symptoms were negative predictors. The cluster analysis revealed three distinct groups: (1) a stable group with high well-being and satisfaction, low somatic symptom frequency, and low incidence of mental disorders; (2) a risk group with moderate well-being, low satisfaction, higher somatic symptom frequency, and increased incidence of mental disorders; and (3) a problematic group characterized by low well-being, low satisfaction, high somatic symptom frequency, and frequent mental disorders.

Conclusions: The findings suggest that enhancing adaptive coping strategies, the sense of control, and perceived social support may significantly improve mental well-being of medical students. Furthermore, identifying risk and problematic groups can support the development of targeted interventions. These insights not only contribute to a better understanding of medical students' mental well-being but also offer practical implications for designing preventive and supportive programs to address mental disorders.

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Psychoneuroimmunology

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High-sensitivity C-reactive protein and cyclothymic temperament as predictors of suicidal risk

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Introduction: An increasing number of studies have investigated the role of inflammation in mood disorders, like an altered C-reactive protein (CRP) hematic level. Some studies have also shown an association between suicidal behavior and increased CRP levels.

Objectives: The objective of this study was to evaluate the association between specific clinical features and high sensitivity CRP (hsCRP) levels with suicidal risk in mood disorders inpatients.

Methods: A naturalistic, observational, cross-sectional study was carried out by retrospectively recruiting 353 adult inpatients affected by severe mental illness (SMI), excluding patients affected by inflammatory pathology, alcohol/substances use disorders or treated by anti-inflammatory/immunosuppressive therapy. In this sample 241 patients suffering from mood disorders were selected. HsCRP levels were measured at the ward admission. All patients were assessed with subscale 5 of the Mini International Neuropsychiatric Interview (MINI-5-s), TEMPS-M, BPRS, HAM-D21, YMRS, CGI-S, CGI-I, MOCA, MDQ, MSRS.

Results: A logistic regression analysis was performed to ascertain the effects of hsCRP and personality trait on the likelihood of suicidality risk. The logistic regression model was statistically significant, $\chi^2(2) = 32.868$, $p < 0.001$. The model explained 18.7% (Nagelkerke R²) of the variance in subjects with a suicidality risk and correctly classified 76.8% of cases. According to the logistic regression model, suicidality risk is negatively predicted by the total score of the YMRS ($\exp(B)=0.969$, $IC95\%=0.947-0.993$, $p=0.01$) and hostility subscale of the BPRS ($\exp(B)=0.905$, $IC95\%=0.819-1.000$, $p=0.05$) while it is positively predicted by the cyclothymic temperament subscale of