

Understanding why individuals vulnerable to psychosis turn to substances is crucial for refining treatment strategies, as addressing these underlying motivations may enhance therapeutic outcomes.

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SP064

Recent progress in women's mental health research and future priorities

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Abstract: Introduction: Women face a greater incidence of mental health issues than men, stemming from societal expectations, gender stereotypes, organizational structures that prioritize male leadership, and the need to balance work responsibilities with home life. Research indicates that women are twice as likely to suffer from depression, generalized anxiety disorder, and post-traumatic stress disorder (PTSD) compared to men. They are also more likely to battle eating disorders.

Methods: The authors will review the current literature on this topic.

Results: 43% of female executives experience burnout, compared to 31% of their male counterparts (Mc Kinsey 2024). Research is definitely needed to better understand the pathophysiology and socioeconomic mechanisms that drive sex-specific risk factors of psychological disorders in women. There is also an urgent need for studies that addressed the specific needs of women including insights around: the biological, life stage, socioeconomic, political and cultural factors associated with being female that have a significant impact on women's mental health.

Conclusion: A mental health reform is necessary to prevent mental illnesses in women, provide specific care to vulnerable women and increase the overall well-being of women living with existing mental health conditions.

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SP065

Health records 'big data' in mental health research – should 'Clinical Informatics' be considered a discipline within Epidemiology?

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Abstract: Background: Traditionally, the discipline of Epidemiology, regardless of clinical specialty, has tended to focus on public health in community populations, although its study designs are

widely applied in more clinically oriented research. The emergence and rapid accumulation of digital health records have resulted in data resources that are both large in sample size and granular in detail presenting unprecedented opportunities for understanding course and outcome in mental health.

Methods: Drawing on over 15 years of experience in building and achieving research output from electronic mental health records data in south London, this presentation will consider the role of Epidemiology as a discipline in this field.

Results: There is no fundamental difference between studying disease incidence in community populations and using healthcare data to study disease course and outcome in clinical populations, and there are similar considerations of sample representativeness and cohort cohesion. Psychometrics principles are also strongly applicable to measurement issues in clinical data, although computer science collaborations particularly underpin the natural language processing and m-health advances required to improve information availability in routine data. Clinical Informatics and Epidemiology face common analytic challenges from data density and complexity, as well as in realising novel clinical trials opportunities.

Conclusions: Clinical Informatics does benefit from the public health focus that Epidemiology brings, as well as its methodological frameworks. However, multiple disciplines are key to setting up and maintaining data resources and achieving research output, so it is equally important to flatten hierarchies and enable a genuine cross-cutting team science approach.

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SP066

Anxiety and depression in young people in the UK: demographic differences and growing treatment gaps

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Abstract: Background: Rates of common mental disorders (CMD), such as anxiety and depression, treated in primary care have increased among young adults in the UK. However, it remains unclear whether this increase reflects a greater tendency to seek help for CMD or a rise in CMD symptoms over time. Additionally, it is not clear if these increases are more pronounced in specific socio-demographic groups. This research examined the temporal trends of primary care-recorded CMD and self-reported CMD symptoms in young adults.

Methods: We included participants born between 1980 and 2003 in two datasets: UK primary care records from the *Clinical Practice Research Datalink*, and longitudinal cohort data from *Understanding Society*. We estimated the annual incidence of primary care-recorded CMD overall and by sex, age, birth cohort, ethnicity, country, region, and deprivation from 2009 to 2019, and explored changes over time using incidence rate ratios. We compared these trends to annual estimates of self-reported CMD symptoms from longitudinal cohort data between 2009-10 and 2019-20, calculating ratios to explore changes in CMD symptoms over time by socio-demographic group.