**Methods:** A questionnaire assessed ultra-processed food addiction in the general population, along with its health effects and factors influencing this behavior. A multivariate analysis, including a logistic regression model, measured the impact of different variables on this addiction.

**Results:** Using the YFAS 2.0 scale, 16.2% of participants show dependence on ultra-processed foods, mostly in mild to moderate forms. Logistic regression reveals that addiction is associated with being female, overweight or obese, and having low perceived well-being, increasing the risk by 6.8, 4.9, and 7.6 times, respectively. These findings suggest that food addiction is influenced by both biological (e.g., BMI) and psychological (e.g., well-being) factors.

**Conclusions:** The literature shows that addiction to ultra-processed foods, though not officially recognized, is associated with overconsumption behaviors and various health issues, including obesity and cardiovascular diseases. These foods, designed to be highly palatable, activate the brain's reward circuits. Public health strategies, such as regulation and labeling, are essential to prevent negative health impacts.

**Disclosure of Interest:** None Declared

## EPV0060

## Everyday Financial Functioning of People with Alcohol Use Disorder

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**Introduction:** Alcohol Use Disorder (AUD) and its comorbidities can have a tremendous negative impact on various activities of daily living, including the capability to manage one's finances. Adequate financial functioning is essential for an individual's health and well-being and is key to leading an autonomous and independent life. Problems with financial functioning can have far-reaching personal and legal consequences, and may lead to financial insecurity or poverty, financial victimisation, placement under guardianship, and reduced opportunities for social and societal participation.

**Objectives:** To evaluate the financial situation and the strengths and weaknesses in the everyday financial functioning of individuals with AUD.

**Methods:** The financial situation and financial performance of an AUD group (n = 52) were compared to a control group (CG) (n = 95), using the Financial Performance Scale (FiPS). In addition, associations between financial performance and everyday contextual factors (i.e., income, depressive symptoms (i.e., Beck Depression Scale - II), social support (i.e., Brief Perceived Social Support Questionnaire)) were explored.

**Results:** As compared to the CG, the AUD group reported to have a significantly poorer financial situation, including lower income levels, more frequent debts, and fewer savings. Furthermore, the AUD group reported a significantly poorer overall financial performance (FiPS total score) than the CG, and significant group differences were observed for relatively complex financial tasks,

such as financial goal setting and doing tax returns. The difficulties in financial performance of the AUD group were, however, considered as relatively mild, since most aspects of financial performance (i.e., FiPS item scores) did not differ between groups. In the total sample, a better financial performance was significantly associated with a higher income, more perceived social support, and fewer depressive symptoms.

**Conclusions:** Individuals with AUD reported a poorer financial situation and more difficulties with performing complex financial tasks compared to controls. These reported weaknesses may stem from cognitive and affective impairments associated with AUD, as well as from a scarcity of financial resources. Since a vicious cycle may exist between financial problems and AUD symptoms, it is relevant to enhance the financial well-being of those individuals with AUD who experience financial difficulties.

**Disclosure of Interest:** None Declared

## EPV0061

## Evaluation of the use of anxiolytics among students from Gabes Institute of Nursing Sciences

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**Introduction:** The use of anxiolytics is a complex phenomenon, increasingly affecting the student population. Inappropriate use of this type of treatment can lead to abuse and even dependence.

**Objectives:** To study the prevalence of dependence on anxiolytics, particularly benzodiazepines BZD in this population and to identify its associated factors.

**Methods:** This was a cross-sectional descriptive study carried out among students from Gabes institute of nursing sciences, for a period of two months(March to May 2024).

Data were collected using an online anonymous questionnaire from Google form that we distributed via Messenger social network.

We used the Benzodiazepine Attachment Cognitive Scale (BACS) to study BZD dependence.

A score ≥ 6 enables to differentiate between dependent and non-dependent patients.

**Results:** We collected data from 135 students. Our sample included only 33 students.

The mean age of our population was 21.30 ±1.51 years and the sex ratio (M/F) was 0.65.

Consumption of psychoactive substances (PAS) was reported by 21 students (63.63%): tobacco by 21.2%, coffee by 12.2% and alcohol by 12.2%.

All students reported having taken benzodiazepines BZD.

In our study, 13 students (39.4%)reported having used BZDs 1 or 2 times in their lives (for experimental purposes). Daily use of BZDs was not reported.

The mean score of the ECAB scale was 6.93, with extremes of[3-10]. According to our results, dependence on BZD was clearly predominant, found in 28 students (84.8%). No correlation was found between the socio-demographic characteristics and the presence of anxiolytic dependence.

BZD dependence (assessed by the ECAB scale) was correlated with coffee consumption (p=0.03), unlike for other substances (tobacco, alcohol, cannabis).