

Forest (RF), Naïve Bayes (NB) and Logistic regression (LR) were used to establish prediction models with area under the curve (AUC) assessed for prediction performance. 10-fold cross-validation was used to evaluate the algorithms on unseen data.

**Results:** In the prediction models, the CART yielded the best performance for suicidal behavior within 5 years after PND diagnosis (AUC 0.78, 95% CI 0.76-0.81). The population that scored highest (17%) in CART model had 84% risk of suicidal behavior. LR also had a comparable performance (AUC 0.78, 95% CI 0.76-0.81), whereas RF (AUC 0.74, 95% CI 0.72-0.76) and NB (AUC 0.70, 95% CI 0.68-0.72) had relatively poor performance. Notably, suicide history was a main contributor in all four models. Other predictors like household income, gestational age and education level were also important indicators of suicidal behavior risk.

**Conclusions:** The machine learning models have promising prediction performance for suicidal behavior after PND. Yet, further improvement is needed before clinical implementation.

**Disclosure of Interest:** None Declared

## O081

### Suicidality Calls to National Helpline After a Terror Attack and War

S. Blum<sup>1</sup> and G. Zalsman<sup>1\*</sup>

<sup>1</sup>Geha Mental Health Center, Petah Tikva, Israel

\*Corresponding author.

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**Introduction:** IMPORTANCE Changes in suicide rates after a nationwide trauma may be different from changes in psychiatric symptoms or general distress after such events. However, very few studies have examined short-term suicide-related reactions after such an event.

**Objectives:** To evaluate the short-term outcome of the events in Israel on October 7, 2023, a large-scale terror attack and unfolding war, on changes in suicidality as reflected in percentages of suicide-related calls in relation to all calls to a national mental health first aid helpline, the Israeli Association for Emotional First Aid (ERAN).

**Methods:** DESIGN, SETTING, AND PARTICIPANTS The data included all interactions via the various ERAN helpline services between January 1, 2022, and December 31, 2023.

EXPOSURES The October 7, 2023, terror attack on Israel.

MEAN OUTCOMES AND MEASURES Changes in the numbers of overall calls and suicide-related calls to the ERAN helpline using an interrupted time-series analysis.

**Results:** RESULTS. Analysis indicated that overall calls increased significantly on October 7. However, the number of suicide-related calls in the 3 months before October 7 was 1,887, whereas 1,663 suicide-related calls were registered in the 3 months after. The percentage of suicide-related calls decreased significantly on October 7 and gradually increased in the following period.

**Conclusions:** CONCLUSIONS AND RELEVANCE The findings suggest that although short-term emotional distress increased after

national trauma, the percentage of suicide-related calls decreased. These results support previous studies suggesting that suicidality is not one of the immediate reactions to such traumas

**Disclosure of Interest:** None Declared

## Schizophrenia and Other Psychotic Disorders

### O082

#### Prevalence of suicide in adolescents and youth at Ultra High Risk for Psychosis - A Systematic Review and Meta-Analysis

S. H. Ang<sup>1\*</sup>, S. Venkateswaran<sup>1</sup>, K. N. C. Naidu<sup>2,3</sup>, M. Bakulkumar Goda<sup>1</sup> and G. Kudva Kundadak<sup>2,4,5</sup>

<sup>1</sup>Yong Loo Lin School of Medicine, National University of Singapore;

<sup>2</sup>Department of Psychological Medicine, National University Hospital;

<sup>3</sup>Saw Swee Hock School of Public Health, National University of Singapore; <sup>4</sup>Department of Psychological Medicine, Yong Loo Lin School of Medicine, National University of Singapore and

<sup>5</sup>Department of Psychological Medicine, Alexandra Hospital, Singapore, Singapore

\*Corresponding author.

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**Introduction:** Suicide remains a major risk factor for individuals suffering from Schizophrenia. Recent studies have established that patients in the prodromal Schizophrenia state (i.e. Ultra High Risk for Psychosis) also experience significant rates of suicidal ideation and behaviour. However, less is known about the prevalence of suicidality among the adolescent and youth UHR population, a demographic particularly vulnerable to the psychosocial and environmental risk factors of psychosis.

**Objectives:** This review aims to synthesise the existing literature on the prevalence of suicidal ideation and behaviour in the adolescent and youth at Ultra High Risk for Psychosis (UHR), and the relevant associations between suicidality and its correlates.

**Methods:** The databases PsycINFO, PubMed, Embase, Cochrane Library, Web of Science and Scopus were accessed up to July 2024. References within selected journals were further hand-searched for eligible articles. Keywords and controlled vocabulary used consisted of: ('Ultra High Risk' OR 'At Risk Mental State' OR 'Clinical High Risk') AND ('Schizophrenia' OR 'Psychosis') AND ('Self-Harm' OR 'Suicide' OR 'NSSI') AND ('Adolescent' OR 'Youth'). Articles that included participants with an established diagnosis of schizophrenia or intellectual disability, history of frank psychotic episodes and extended use of antipsychotics were excluded. A meta-analysis of prevalence was subsequently performed for lifetime suicidal ideation, lifetime non-suicidal self-injury, lifetime suicidal attempt and current suicidal ideation. A narrative review was also carried out for the correlates of suicidality amongst the adolescent and youth UHR population.

**Results:** Fourteen studies were included in this meta-analysis. Meta-analysis revealed a high prevalence of lifetime suicidal ideation (56%), lifetime non-suicidal self-injury (37%), lifetime suicidal attempt (25%) and current (2-week) suicidal ideation (58%).