

tiple linear regressions were used to examine predictors of mental health impairment.

Results: Our findings demonstrate that only psychoeducation serves a protective factor against psychological distress. Interpersonal support was found to predict increased levels of anxiety and depression and adaptive coping was found to predict increased levels of anxiety, depression, and burnout. No significant relationship between community resources and any type of mental health impairment was found.

Conclusions: Public mental health efforts should capitalize on the effectiveness of psychoeducation to promote strategies for managing symptoms of psychological distress as well as providing information regarding resources and services. In the context of complex emergencies that have an immediate effect on already scarce resources at a personal, community, and institutional levels, psychoeducation has the advantage of a low-cost intervention, easily transferable between communities, providing immediate support as well as sustainability over time.

Disclosure of Interest: None Declared

EPV1066

The Suicidal Physician: When the Doctor Wants to Die

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Introduction: Medical-related professions are at high suicide risk. Suicide is a major cause of premature death among physicians, but the prevalence of suicide-related behaviors is inconsistent across studies.

Objectives: Presenting a review of the prevalence and risk factors of suicide among physicians.

Methods: Search on Pubmed® and Medscape® databases with the following keywords: “physicians” and “suicide”. We focused on data from systematic reviews and meta-analyses. The articles were selected by the authors according to their relevance.

Results: Female and US physicians were at higher risk of suicidal behavior. Suicide decreased over time, especially in Europe. Some specialties might be at higher risk such as anesthesiologists, psychiatrists, general practitioners and general surgeons. It is well established that anesthesiologists tend to have much higher rates of substance abuse than other physicians. Psychiatrists are also known to have more mental distress, mental illness and burnout compared with other physician groups and have concerning rates of depression and psychotropic. Physicians are less likely to seek mental health services out of career concerns, culture and/ or a predisposition toward self-reliance. Additionally, retrospective toxicology screening of suicide data finds that physicians are more likely than nonphysicians to have positive results for antipsychotics, benzodiazepines, and barbiturates but not antidepressants.

Conclusions: Physicians are an at-risk profession of suicide, with women particularly at risk. The rate of suicide in physicians decreased over time, especially in Europe. The high prevalence of physicians who committed suicide attempt as well as those with suicidal ideation should benefit from preventive strategies at the workplace. Physician suicides are multifactorial, and further research into these factors is critical. Appropriate preventive and

treatment measures should be implemented to reduce the risk of suicide-related behaviors in this population.

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EPV1069

Another Tragic Pandemic Strikes: It Is Suicide

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Introduction: Another pandemic besides COVID-19 stalks the land. This one takes a heavy toll on the young.

Suicide occurs throughout the lifespan and is the second leading cause of death among 15-29 years old globally.

Objectives: The objective of this review is to highlight for another tragic pandemic, with main emphasis on the preventable character.

Methods: Data was obtained through an internet-based literature review, using the research platform Pubmed and the World Health Organization website. Seven articles from the last two years were included.

Results: Improved surveillance and monitoring of suicide attempts and self-harm is a core element of suicide prevention and desirable worldwide.

A public health surveillance system based on medical records would provide and disseminate data that would guide and prioritize the best interventions in each context and contribute to an effective overall suicide prevention strategy.

Conclusions: Close to 800 000 people die due to suicide every year, which is one person every 40 seconds.

According to current data, for each adult who died by suicide there may have been more than 20 others attempting suicide.

Effective and evidence-based interventions can be implemented to prevent suicide and suicide attempts.

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EPV1070

Suicide in the Azores Archipelago - a epidemiological study and review

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Introduction: The phenomenon of suicide and self-harm is one of the most intriguing and disturbing human behaviours. Suicide is global public health problem, with multiple and complex contributing factors. Global trend show a stabilizing or descending curves in the last years. The Portuguese atlantic archipelago of Azores has had an opposite trend that together with regional protective and risk factors ought to be addressed for further tailored interventions.

Objectives: Review of the up-to-date literature on this topic and present the recent suicide-related data in the Azores.

Methods: Unsystematic review of the most recent and relevant literature.