

EPV0971

Oncologists' beliefs about people with psychotic disorders : a qualitative studyA. Le Glaz^{1*}, C. Lemey¹, M. Walter¹, C. Lemogne² and C. Flahault³¹Brest Medical University Hospital, Psychiatry, Bohars, France; ²AP-HP, Assistance Publique - Hôpitaux de Paris, Adult Psychiatry, Paris, France and ³Université de Paris – INSTITUT DE PSYCHOLOGIE, Laboratoire De Psychopathologie Et Processus De Santé (ur 4057), Boulogne Billancourt, France

*Corresponding author.

doi: 10.1192/j.eurpsy.2022.1697

Introduction: Cancer is the second major cause of death among people with psychotic disorders. With the same incidence, mortality in these patients remains higher than in the general population. As stigma has been identified as a risk factor for excess mortality, we focused on oncologists' beliefs and attitudes towards people with psychotic disorders.

Objectives: The aim of this study was to uncover physicians' representations about the impact of psychosis on oncological care.

Methods: In this qualitative study, individual semi-structured interviews were conducted with 20 physicians working in oncology in the University Hospital of Brest (France). Transcribed interviews were thematically analyzed. This study meets the COREQ criteria.

Results: Psychosis is described as a broad-spectrum condition whose severity ranges from the "mild" patient with imperceptible abnormality to the "severe" patient with cognitive and affective deficits. Oncologists identified behavioral and emotional symptoms which may modify the patient-physician relationship with difficulties to interact. Some of them consider that these patients are not interested in their health and will not get involved in oncological care. While the psychotic disorder is not considered as a limiting factor per se, oncologists felt concerned about being stigmatizing. They mentioned different aspects (like anticipation of non-compliance or inability to get help) that lead to changes in conventional treatment regimens and may result in a loss of opportunity.

Conclusions: Oncologists' beliefs may lead to stigmatizing attitudes towards people with psychotic disorders who may not be given the best possible chances. Thus, these specific elements should be the basis for collaboration between psychiatrists and oncologists.

Disclosure: No significant relationships.

Keywords: Oncologists; beliefs and attitudes; PSYCHOTIC DISORDERS; stigma

EPV0970

Psychiatric manifestations of paraneoplastic syndromes

M. Lemos*, A. Lourenço and M. Ribeiro

Centro Hospitalar Lisboa Norte, Psychiatry, Lisboa, Portugal

*Corresponding author.

doi: 10.1192/j.eurpsy.2022.1698

Introduction: Paraneoplastic syndromes (PS) result from indirect effects of neoplasms. In 50% of the cases the symptoms precede the diagnosis and run independently. PS may involve the peripheral or central nervous system, resulting in symptoms from sensory neuropathies to several neuropsychiatric manifestations.

Objectives: To review the psychiatric manifestations of paraneoplastic syndromes affecting the nervous system.

Methods: Selective literature review via PubMed search, using the keywords "paraneoplastic syndromes", "endocrine paraneoplastic syndromes", "neuropsychiatric manifestations", "limbic encephalitis".

Results: The prevalence of PS varies with the type of cancer (<1% for breast and ovarian cancers; 3-5% for small cell lung cancer; 20% for thymomas). The general mechanisms behind PS are related to the production of substances by the tumor that directly or indirectly cause distant symptoms, the depletion of substances or the host response to the tumor. Frequently there are autoimmune phenomena involved, with the production of antineuronal antibodies that recognise various antigens at the nervous system. Paraneoplastic neurological disorders include limbic encephalitis that can present subacutely with symptoms of depression, irritability, hallucinations, cognitive impairment associated with sleep alterations, confusion and seizures. Others include psoclonus-myoclonus ataxia syndrome, neuromyotonia and cramp fasciculation syndrome. Metabolic and endocrine paraneoplastic syndromes (hypercortisolism, carcinoid tumors, pancreatic cancer) can result from the production of cytokines and hormones by the tumor and produce mood disorders, confusional states and psychosis.

Conclusions: PS can be related to various neuropsychiatric manifestations affecting consciousness, cognition, mood and perception. The recognition of this association can alert for the possibility of a cancer diagnosis specially when facing a patient with unusual clinical presentation.

Disclosure: No significant relationships.

Keywords: endocrine paraneoplastic syndromes; neuropsychiatric manifestations; limbic encephalitis; paraneoplastic syndromes

EPV0971

A Qualitative Research to Examine Experiences of Turkish Women with Breast CancerC. Yastibaş¹, G. Dirik¹ and İ.G. Yılmaz-Karaman^{2*}¹Dokuz Eylül University, Psychology Department, İzmir, Turkey and²Eskişehir Osmangazi University, Faculty of Medicine, Psychiatry Department, Eskişehir, Turkey

*Corresponding author.

doi: 10.1192/j.eurpsy.2022.1699

Introduction: Breast cancer is a serious public health problem and one out of every 4 women diagnosed with cancer is breast cancer. Although the survival rate has increased due to advances in diagnosis and treatment, getting a cancer diagnosis is a highly stressful life event and seriously affects the lives of patients.

Objectives: Therefore, the aim of this qualitative study is to explore the experiences of women with breast cancer.

Methods: Data were gathered using semi-structured forms, in-depth interviews with 7 patients aged between 29 and 64 who had been diagnosed with breast cancer in 2017 and after. All interviews were tape-recorded and the themes have resulted in analyzing the content of the recorded data.

Results: It has been determined that women have difficulties in getting information from healthcare professionals, emotional supports from their partners and family members, dealing with losses in roles and femininity, and coping with intrusive thoughts. However, it has been highlighted that women have experienced some

positive changes in certain areas such as deeper interpersonal relationships with others, appreciating health and life.

Conclusions: As a result of the study, it has been thought that it is important to reduce the distress level of women with breast cancer related to their needs and difficulties and to encourage their positive changes. Besides, working in cooperation with healthcare professionals responsible for their treatment will be beneficial to reduce the distress level of the women.

Disclosure: No significant relationships.

Keywords: breast cancer; Qualitative research; post-traumatic growth; Distress

Pain

EPV0975

Mindfulness in pain self-control of people with chronic pain: a cross-sectional study

C. Laranjeira and A. Querido*

Polytechnic of Leiria, School Of Health Sciences/ Citechcare, Leiria, Portugal

*Corresponding author.

doi: 10.1192/j.eurpsy.2022.1700

Introduction: Chronic pain has a significant impact on individuals' daily lives, and its control is essential for improving quality of life. In this sense, the practice of Mindfulness is a useful non-pharmacological technique for self-management of chronic pain.

Objectives: This study aims to identify the level of knowledge regarding the effectiveness of Mindfulness for self-control of pain by people with chronic pain.

Methods: A cross-sectional study was conducted on a sample of 23 adults with chronic pain. The online survey assessed socio-demographic characterization, Brief Pain Inventory, and knowledge/opinion about the effectiveness of mindfulness strategies.

Results: The sample consisted mostly of middle-aged women, with family support, employed and with higher academic qualifications. 47.8% of the sample had experienced pain for over 20 years with the most prevalent diagnosis being fibromyalgia. The average intensity of chronic pain corresponded to moderate pain and the level of acceptance of it was low, interfering in instrumental activities of daily life. Although they had never tried the technique, most of the sample knew what mindfulness consisted of, considering it as a viable option for self-management of chronic pain. Moderate and positive correlations were found between the level of acceptance of pain and greater availability for the practice of mindfulness ($\rho=0.137$; $p<0.001$), the same happened between satisfaction with the practice of mindfulness and self-control of pain ($\rho=0.259$; $p<0.001$).

Conclusions: Our findings outline the need to include non-pharmacological measures such as mindfulness in therapeutic schemes for chronic pain management, given the manifest interest of this population.

Disclosure: No significant relationships.

Keywords: Mindfulness; self-control; knowledge; chronic pain

EPV0978

Relationship between chronic pain syndrome and anxiety disorders in patients with rheumatoid arthritis

N. Chernus*, R. Gorenkov, S. Sivkov, A. Sivkov, T. Savina, A. Serdakova and A. Zolotovickaja

The I.M. Sechenov First Moscow State Medical University: Moscow, Russia, The Outpatient Care Department, Moscow, Russian Federation

*Corresponding author.

doi: 10.1192/j.eurpsy.2022.1701

Introduction: Chronic pain syndrome is still one of the leading complaints of patients with rheumatoid arthritis (RA).

Objectives: Study the relationship between chronic pain syndrome of different duration and the level of anxiety disorders.

Methods: Clinical and psychophysiological examination of 76 patients with RA was carried out, the average age was 42.4 ± 7.2 years. The severity of pain syndrome was determined on the VAS scale, the level of anxiety by the Spielberger-Hanin technique

Results: Analysis of pain syndrome according to YOUR revealed higher rates ($p < 0, () 1$) in patients with shorter periods of disease: up to 12 months and more than 12 months: 66.0 ± 1.5 mm and 61.9 ± 1.5 mm, respectively, than in patients with a longer period of war - more than 3 years (53.7 ± 1.0 mm). Psychophysiological examination of RA patients revealed anxiety spectrum disorders in 53 (69.7%) patients. The severity of anxiety disorders was different depending on the duration of the chronic pain syndrome: the highest indicators of reactive anxiety were detected in patients with a length of pain syndrome of up to 12 months: 45.7 ± 0.6 points, in patients with a disease period of more than 12 months - 42.4 ± 0.5 points, and in patients with a disease period of more than 3 years 37.6 ± 0.5 points.

Conclusions: Thus, a direct correlation between the degree of pain severity and the level of anxiety disorders is revealed, which is desirable to consider when selecting pathogenetic therapy

Disclosure: No significant relationships.

Keywords: pain; anxiety; rheumatoid arthritis; pain,

Personality Disorders

EPV0979

Review of the interaction between lifestyle habits and personality disorders.

S. St-Amour^{1*}, F.-A. Bérubé², L. Cailhol³ and C. Le Corff²

¹Université du Québec à Montréal, Sciences De L'activité Physique, Montréal, Canada; ²Institut Universitaire en Santé Mentale de Montréal, Clinique Des Troubles Relationnels Et De La Personnalité, Montreal, Canada and ³Institut Universitaire de Santé Mentale de Montréal, Psychiatrie, Montréal, Canada

*Corresponding author.

doi: 10.1192/j.eurpsy.2022.1702

Introduction: Individuals with personality disorders have a decreased life expectancy when compared to the general population in particular due to physical illnesses. Many factors can be associated with those physical illnesses such as lack of physical activity and bad nutritional habits. Moreover, physical activity and nutrition (lifestyle) intervention have shown great results in decreasing symptoms and improving condition in affective and anxiety