

EPV1009

Specifics of attitudes towards traditional Chinese medicine in dental students

E. Nikolaev and S. Petunova*

Ulianov Chuvash State University, Social And Clinical Psychology Department, Cheboksary, Russian Federation

*Corresponding author.

doi: 10.1192/j.eurpsy.2022.1725

Introduction: Traditional Chinese medicine (TCM), conceived in the womb of Chinese culture, is gaining more and more popularity in the world. What views on its possibilities do dentists studying in Russia have?

Objectives: Our goal is to establish the peculiarities of the attitude to TCM that are characteristic of dental students and correlate them with their psychosocial qualities.

Methods: We surveyed anonymously 106 dental students of Ulianov Chuvash State University using the Attitude to TCM Survey (E. Nikolaev) and the Sociocultural Health Questionnaire (E. Nikolaev). To analyze the interrelations, we used a correlation analysis.

Results: More than two thirds of the respondents (72.6%) know about TCM, 20.8% consider it more effective than conventional medicine. Respondents with a higher level of stress show more interest in TCM ($r=.27$, $p<.05$), those who smoke hookah have less interest ($r=-.25$, $p<.05$). Students who less often work out in a gym are ready to turn to TCM ($r=.23$, $p<.05$). Students who are less often engaged in sports are more inclined to go to China for TCM treatment ($r=.19$, $p<.05$). They also less often agree that TCM can help Russian people ($r=-.22$, $p<.05$). Stronger belief in the possibilities of TCM correlates with deeper trust in private medicine ($r=.22$, $p<.05$). We did not find any correlations with the level of health.

Conclusions: A more positive attitude to TCM in dental students is correlated with less physical activity, higher stress, as well as deeper trust in private medicine.

Disclosure: No significant relationships.

Keywords: Traditional Chinese medicine; dental students; attitudes

EPV1008

The concept of Evil in Psychiatry: Philosophy, neurobiology and clinical implications

A. Maia^{1,2,3*} and S. Nascimento⁴

¹Nova Medical School, Mental Health, Lisbon, Portugal; ²Centro Hospitalar de Lisboa Ocidental, Mental Health And Psychiatry, Lisbon, Portugal; ³Champalimaud Centre for the Unknown, Neuropsychiatry Unit, Lisbon, Portugal and ⁴Centro Hospitalar Psiquiátrico de Lisboa, General Psychiatry, Lisbon, Portugal

*Corresponding author.

doi: 10.1192/j.eurpsy.2022.1726

Introduction: Although difficult to define, the concept of evil is widely used and implicitly influences psychiatric judgements and diagnosis. Most definitions of evil rely on classical philosophical concepts, but it remains controversial if evil is a concept by itself or rather a dysfunction on the ability to experience goodness. Also, it is unclear if there is a neurobiological basis for evil or if it is entirely dependent on socio-cultural beliefs.

Objectives: In this work, we intend to systematize evidence on the philosophical definitions and neurobiological correlates of evil, and reflect on its implications in clinical psychiatry.

Methods: Literature review.

Results: The concept of evil has been a theme of debate since the ancient Greek, where Plato argued that evil was a result of ignorance and Aristoteles saw morality as a guide for education and politics. Nietzsche claimed that evil was a dangerous concept that was created by the church, while Hannah Arendt underlined the banality of evil by highlighting “thoughtlessness” that frequently justify evil acts. From a neurobiological perspective, studies assessing individuals with neuro-psychiatric conditions associated with evil-related behavioral abnormalities have been suggesting a potential role of frontal and limbic structures, as well as of the serotonergic system. However, several of these studies assessed presumed correlates of evil, such as antisocial personality disorder or impulsive-aggressive behavior.

Conclusions: Despite the polemic frontier between neurosciences and morality, a conceptual insight over the definition of evil is vital to guide comprehensiveness and clinical approach when dealing with deviant evil-like behaviors.

Disclosure: No significant relationships.

Keywords: Evil; Neurobiology; Antisocial Personality disorder; philosophy

EPV1009

Understanding Generalized Anxiety: Contributions from Phenomenology and Philosophy

P.A. Gouveia*

Local health Unit of Lower Alentejo, Psychiatry, LISBOA, Portugal

*Corresponding author.

doi: 10.1192/j.eurpsy.2022.1727

Introduction: Anxiety is an ambiguous term, meaning an emotional state, a clinical symptom, a disorder, or a group of disorders. Anxiety is a normal feeling that arises when a person believes he is in danger from a threat or unidentified danger, ensuing with a state of alertness, arousal, and exploratory attention. Its distinction from neighbouring concepts, such as anguish, fear, worry, anxiety, panic, or uneasiness, is valuable but controversial.

Objectives: Review and synthesize various contributions from phenomenology and philosophy to the understanding of what it is like to experience generalized anxiety.

Methods: Selective review of the most prominent literature regarding anxiety psychopathology, namely that of Jaspers, Heidegger, López-Ibor, Sims, Berríos, Femi Oyebode, Pio Abreu, James Aho, Picazo Zappino and Gerrit Glas.

Results: Jaspers described free-float anxiety as common and painful, floating and detached, as a feeling of misunderstood genesis, imposing despite the inapparent object, driving an inescapable need to provide some content to it, but also susceptible to insight by those who experience it. It can take a vitalized or primarily psychic form. Anxiety is closely related to the limits of the human being and to (hopelessness). For Heidegger, angst is the expression of authentic existence. López-Ibor considered anxiety and anguish nuances of the same experience, in both of which there is

fear of the dissolution of the unity and continuity of the self (anguish). When what exists is not a fear, but only a threat, anxiety arises.

Conclusions: Phenomenologically informed psychopathology is relevant for clinicians. Complementing neurosciences, each answers questions that the other cannot.

Disclosure: No significant relationships.

Keywords: phenomenology; generalized anxiety; philosophy; psychiatry

Posttraumatic Stress Disorder

EPV1010

Prevalence of Late Onset Stress Symptomatology (LOSS) in geriatric combat veterans and its relation with dementia: A Pilot Study

R. Barman^{1*} and M. Detweiler²

¹Genesis Medical Center, Behavioral Health, Davenport, United States of America and ²Veterans Affairs Medical Center, Psychiatry, Salem, United States of America

*Corresponding author.

doi: 10.1192/j.eurpsy.2022.1728

Introduction: Late onset stress symptomatology (LOSS) is a relatively new concept in combat veterans, which includes repeated but not intrusive thoughts about combat-related experiences, irritability, or nightmares that do not cause impairment of daily functioning.

Objectives: The objectives of this study were to identify the LOSS phenomenon in geriatric combat veterans and to establish a correlation between LOSS and cognitive deficit \pm major stressors.

Methods: The electronic database was searched for the last 2 years from starting the study with the hypothesis that the LOSS phenomenon has been diagnosed with sleep, anxiety, trauma-related, or impulse control related disorders. Records were examined for trauma-related symptoms, excluding major symptoms of trauma-related stressors. The veterans were assessed objectively using LOSS, PCL-5 (PTSD checklist for DSM-5), social readjustment rating scales, and MOCA (Montreal Cognitive Assessment scale) for cognitive screening.

Results: We reviewed 1329 patient records and identified 35 potential LOSS subjects. Four veterans were diagnosed with PTSD not otherwise specified, 2 with anxiety disorder unspecified, and 1 veteran with nightmare disorder. The majority (85%) of the veterans scored >40 in PCL-5, and only one veteran fulfilled the criteria for LOSS, who scored 67 on the LOSS scale. All the veterans scored ≤ 25 on MOCA with a significant deficit in recent recall.

Conclusions: Our study shows new onset stress-related symptoms are strongly associated with significant cognitive deficits and higher individual stress levels. The onset of PTSD symptoms in older combat veterans might have been correlated with the onset of cognitive deficits, as suggested by several other studies.

Disclosure: No significant relationships.

Keywords: Dementia; Late onset PTSD; LOSS; PTSD

EPV1012

Value of psychological counseling for trainees exposed to the death of a patient in emergency and resuscitation departments

I. Betbout^{1*}, B. Amemou¹, A. Ben Haouala¹, Y. Ben Arbia², I. Khadhrawi², F. Zaafrane¹, A. Mhalla¹ and L. Gaha¹

¹fattouma bourguiba hospital, Psychiatry, Psychiatry Research Laboratory Lr05es10 "vulnerability To Psychoses" Faculty Of Medicine Of Monastir, University Of Monastir, monastir, Tunisia and ²High school of sciences and techniques of the health of Sousse, Psychiatry, sousse, Tunisia

*Corresponding author.

doi: 10.1192/j.eurpsy.2022.1729

Introduction: Trainee emergency and resuscitation technicians are not prepared during their academic training to deal with their psychological reactions to the death of a patient, we wanted to describe their feelings and understand the aggravating factors and highlight the need for intervention.

Objectives: Our study aims to describe the psychological reactions of trainees exposed to the death of a patient on the internship grounds and to demonstrate the usefulness of specific psychological counseling

Methods: It is a prospective interventional study carried out with 2nd and 3rd-year students of the emergency and resuscitation section, our collection was done using a self-administered questionnaire with a validated PDI scale before the training, and a satisfaction questionnaire with the same scale after the training.

Results: Our population is young, with an average age of 20.05 years, and is predominantly female, with a sex ratio of 0.12. Eighty-seven percent of the population stated that they were not prepared to deal with their feelings about the death of a patient, and this harmed the quality of care for 68% of the students. According to the scores of the PDI scale in pre-training 77.33% of the students are at risk of developing PTSD, this percentage decreases to 30.67% according to the same scale in post-training.

Conclusions: it is important to take into consideration the suffering of trainees exposed to traumatic events such as the death of patients and to prepare them psychologically to deal with these situations

Disclosure: No significant relationships.

Keywords: psychological reactions-trainee -death of a patient

EPV1013

Methylenedioxymethamphetamine-assisted Psychotherapy For Posttraumatic Stress Disorder: A Review

J. Sá Couto*, B. Da Luz, J. Rodrigues, M. Pão Trigo and T. Ventura Gil

Centro Hospitalar Universitário do Algarve, Departamento De Psiquiatria E Saúde Mental, Unidade De Faro, Faro, Portugal

*Corresponding author.

doi: 10.1192/j.eurpsy.2022.1730

Introduction: Posttraumatic stress disorder (PTSD) is a psychiatric condition which can be developed following traumatic experience. Treatment guidelines have long considered psychotherapy as a first line treatment. Despite that, PTSD remains an illness with high