

treatments, and self-care? Medical Psychology brings us theories for this understanding. Grave's Disease is an autoimmune disorder, a form of hyperthyroidism with a goitre, affecting also the eyes and the skin, as well as emotional manifestations. Weight loss, sometimes psychologically welcome, although due to a disease, can mean a psychoanalytic secondary gain. So, the medicine that leads to clinical improvement can be taken with ambivalence and bad adherence to treatment. It is important to differentiate between disease, a scientific entity explained by the clinical professional, and illness as a patient's subjective perception of an un-health.

Objectives: To understand psychodynamically the fantasies, desires, and views related to Graves' Disease as reported by patients in hyperthyroidism but without ophthalmopathy interviewed at an endocrinology-specialized outpatient clinic. (in the EPA-2023, it was presented the qualitative results of a sample in hyperthyroidism, with ophthalmopathy, studied at the same service).

Methods: Clinical-Qualitative Method designed by Turato. Data collected through Semi-Directed Interviews with Open-ended Questions in-Depth; and Field Notes, transcript fully. Treated by the Seven Steps of Clinical-Qualitative Content Analysis of Faria-Schützer, using psychodynamic concepts from Balintian Medical Psychology. Although we have extracted categories that permit us interesting discussions, we intend to close the sample (through the information saturation criterion by Fontanella) when we obtain other categories. The interviewer, a male psychologist, is the first author. The findings are validated by peer-reviewers of the Lab of Clinical Qualitative Research of the State University of Campinas.

Results: Three categories were chosen for this presentation: 1) "An atomic bomb in my life": How drastic changes of a hormonal disease re-symbolize the patient's life; 2) "I didn't think the thyroid did that much": the disease seen as a metaphor in a psychological blaming language to own disease and to himself as a sick person. 3) "I have so much medicine!": a mode of referring to treatment that would justify an undisciplined use of medications.

Conclusions: Our findings can help clinical professionals to have a better understanding of some psychological meanings which have sense in the patients' conscience, often not verbalized clearly in the conversation, and so to handle better the patients and relatives. In this way, it can reduce the patient's resistance to recommended treatment, as well as encourage the clinical team to construct empathy with them.

Disclosure of Interest: None Declared

EPV0297

A Study of Dry Mouth and Gastrointestinal Disorders in Patients Taking Antidepressant

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Introduction: Dry mouth is a subjective symptom of the feeling of dehydration inside of the mouth and is closely linked to reduced salivary secretion. The occurrence of dry mouth and GI disorders due to antidepressants greatly affects the course of the mental disorder and medication compliance, but it has barely ever been studied.

Objectives: The purpose of this study was to identify the characteristics of dry mouth and gastrointestinal (GI) disorders in antidepressant patients.

Methods: The study included 103 antidepressant-taking patients. Antidepressants were classified according to their mode of action. The GI disorders were investigated using the medical records of the patients. The Patient Health Questionnaire-15 and a questionnaire for assessing dry mouth symptoms were used in this study. The questionnaire for the evaluation of dry mouth symptoms, a visual analog scale (VAS)-based instrument, developed and evaluated for reliability by Lee et al. was used to assess dry mouth. In the questionnaire, 6 VAS items were assessed for the extent of dry mouth (0-100 points): 1) dry mouth at night or when waking up in the morning, 2) dry mouth during the day, 3) dry mouth when eating, 4) difficulty in swallowing, 5) subjective evaluation of the volume of saliva in the mouth, and 6) overall discomfort in daily life. Additionally, four items examined behaviors due to dry mouth (1-5 points): 1) frequency of waking up from sleep due to dry mouth, 2) frequency of preparing drinking water before going to bed, 3) frequency of drinking water when eating solid foods, and 4) frequency of eating hard candies or chewing gums to help dry mouth.

Results: The score for "overall discomfort due to dry mouth in daily life" (31.72±33.82), "dry mouth at night or in the morning" (47.86±35.87), and "dry mouth during the day" (39.83±31.67) were slightly higher than "discomfort in chewing or swallowing foods". According to somatization severity, the mean values were 116.36±113.34 in the mild, 213.18±136.98 in the moderate, and 277.59±201.44 in the severe, the between-group difference was significant (F=10.294, p<0.001). According to the class of antidepressants, the mean score was 180.00±147.5 for vortioxetine, 194.25±169.33 for selective serotonin reuptake inhibitors (SSRIs), 223.61±156.70 for serotonin and norepinephrine reuptake inhibitors (SNRIs), 75.00±57.00 for norepinephrine dopamine reuptake inhibitors (NDRIs), 201.67±174.66 for NASSAs, and 116.67±132.03 for agomelatine. A total of 67 (65.0%) patients had at least one GI disorder.

Conclusions: The study findings are expected to help increase medication compliance in antidepressant patients by better controlling the side effects experienced by the patients.

Disclosure of Interest: None Declared

EPV0298

Personalization of therapy of psychopathological complications of cardiac surgery in artificial circulation conditions

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Introduction: The study of the clinical and phenomenological features of psychopathological complications of cardiac surgery (CS) in artificial circulation conditions (ACC), the development of modern approaches to early diagnosis and prognosis of