

## EPP0753

## Self-stigma and coping strategies in remitted Tunisian patients with bipolar disorder

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**Introduction:** Patients with bipolar disorder may adjust their behaviors and choose a coping strategy to face self-stigma and avoid unpleasant social and professional adversities. These coping orientations are either defensive, or active behavioral strategies.

**Objectives:** The aim of this study was to assess self-stigma in remitted patients with bipolar disorder and to investigate coping strategies to struggle the internalized stigma.

**Methods:** We conducted a cross-sectional, descriptive, and analytical study of 61 patients with bipolar disorder. Euthymia was verified using the Hamilton scale for depression and the Young scale for mania. We used the Internalized Stigma of Mental Illness (ISMI) to evaluate self-stigma, the Stigma coping orientation Scale (SCOS) to assess coping strategies.

**Results:** The mean age of patients was 43.4 years. The sex ratio was 2.4. The mean score on the ISMI was 2.36. More than half of our patients (59%) were self-stigmatized. Secrecy (57%) and withdrawal (56%) were the most adopted coping strategies. The mean self-stigma score was significantly associated with higher scores on defensive coping strategies such as secrecy ( $p < 10^{-3}$ ) and withdrawal ( $p < 10^{-3}$ ). However, scores on challenging ( $p < 10^{-3}$ ), education ( $p < 10^{-3}$ ) and distancing ( $p = 0.014$ ) strategies were inversely correlated with self-stigma scores. The logistic regression analyses revealed a significant association between defensive coping strategies (secrecy and withdrawal) and internalized stigma.

**Conclusions:** The relationship between defensive coping strategies and self-stigma appears to be bidirectional. Enhancing coping strategies oriented to education, challenging and engaging patients in social interaction and reducing the use of deleterious coping strategies focusing on secrecy and withdrawal may lead to restrict self-stigma.

**Disclosure:** No significant relationships.

**Keywords:** coping; bipolar disorder; self-stigma

## EPP0751

## Internalized stigma and self-esteem among remitted patients with bipolar disorder

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**Introduction:** Self-stigmatization in patients with bipolar disorder could lead to shame, self-judgement, impaired quality of life, and could negatively affect self-esteem impeding recovery.

**Objectives:** The aim of this study was to assess self-stigma in remitted patients with bipolar disorder and to evaluate its impact on self-esteem.

**Methods:** We conducted a cross-sectional, descriptive, and analytical study of 61 patients with bipolar disorder. Euthymia was verified using the Hamilton scale for depression and the Young scale for mania. We used the Internalized Stigma of Mental Illness (ISMI) to evaluate self-stigma, and the Rosenberg scale to assess self-esteem.

**Results:** The mean age of patients was 43.4 years. The sex ratio was 2.4. The mean score on the ISMI was 2.36. More than half of our patients (59%) were self-stigmatized. With regard to self-esteem, the mean score obtained on the Rosenberg scale was 27.72. Low or very low self-esteem was found in 54% of patients. The most self-stigmatized patients had significantly lower self-esteem ( $p < 10^{-3}$ ).

**Conclusions:** Internalized stigmatization negatively affects self-esteem of patients with bipolar disorder. Psychoeducation and cognitive behavioral therapy would improve self-esteem and enhance psychosocial treatment adherence and move people with bipolar disorder toward a culture of recovery based on hope and self-determination.

**Disclosure:** No significant relationships.

**Keywords:** bipolar disorder; self-stigma; self-esteem

## EPP0753

## Working memory performance in euthymic bipolar patients

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**Introduction:** Working memory (WM) deficit in bipolar disorder (BD) is heterogeneous and seems to be affected by both, demographic and clinical aspects, of the patient.

**Objectives:** To assess the WM performance in euthymic bipolar patients (BP) comparing to healthy controls (HC) and to identify demographic and clinical factors associated with it.

**Methods:** A case-control study was conducted among euthymic bipolar patients according to DSM-5. The recruitment of patients was performed in the outpatient psychiatric unit in the university hospital Hedi Chaker in Sfax during the period from January to December 2020. The HC were matched to BP on gender, age and education level. The Screening for Cognitive Impairment in Psychiatry scale (SCIP) was used to assess the WM performance by the WM test (WMT).

**Results:** We recruited 61 BP (37 males and 24 females) and 40 HC (20 males and 20 females). The average age of BP was 41.75 years (SD=11.6 years). The BD group included 47 BD type I and 14 BD type II patients. The mean duration of illness was 9.75 years

(SD=7.93 years). Thirty-seven BP (60.7%) had a history of psychotic symptoms. The WMT score was significantly lower among BP than HC ( $p<0.001$ ). The female gender, the type II of BD and the history of psychotic symptoms correlated with a poorer performance on WMT ( $p=0.019$ ; 0.017 and 0.002, respectively).

**Conclusions:** BP have shown significant impaired performance in WM even during euthymia. Female gender of patient, type II of BD and psychotic symptoms seem to be the predictors of this impairment.

**Disclosure:** No significant relationships.

**Keywords:** working memory; euthymic patients; bipolar disorder; Associated factors

## EPP0754

### Overlapping of clinical symptoms between schizophrenia and bipolar disorder

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**Introduction:** Schizophrenia (SCH) and bipolar affective disorder (BP) are complex disorders that overlapping both in their clinical symptoms and certain familiar characteristics. They share some common characteristics but there are also key differences. The frequency of overlapping symptoms between these diseases could give us more information about the current validity of the diagnosis based on existing diagnostic criteria. Similarities within and between these two disorders in the future, can possibly redefine greater reliability of diagnosis.

**Objectives:** The aim of the study was to investigate the frequency of overlapping symptoms between BP and SCH.

**Methods:** The sample included 159 patients diagnosed with SCH and 61 with BP who were followed over a two year period. The research was conducted at the UCCS Psychiatric Clinic. Assessment of clinical symptoms and diagnosis were performed using a structured clinical interview (SCID I), a list of operationalized criteria (OPSCRIT), a scale for the assessment of positive and negative symptoms (PANSS), a scale for the assessment of manic symptoms (YMRS).

**Results:** The overall PANSS score was significantly higher in patients with SCH compared to patients with BP, but on the general psychopathology there are no significant differences between SCH and BP. Symptoms of mania are significantly more pronounced in patients with BP compared to those with SCH.

**Conclusions:** Our results of overlapping of individual symptoms between SCH and BP can speak infavor of the theory of disease continuum. And can also help us in understanding symptoms and guide us to develop optimal treatment strategies.

**Disclosure:** No significant relationships.

**Keywords:** schizophrenia; YMRS; PANSS; Bipolar Affective Disorder

## EPP0755

### Initiative for ethical media reporting about mental health

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**Introduction:** As a part of continuous destigmatization of mental illness and people with mental disorders significant importance has media reporting, especially in modern times.

**Objectives:** Media reports about mental health (MH) are still an issue of a great discussion concerning their content especially in ethical matters. Many initiatives in different countries resulted in various changes in attitudes and influenced on this topic. But the image of mental illness as well as psychiatry in general are still burdened with the shadow of stigma.

**Methods:** To show development of one of initiatives in Bosnia and Herzegovina (BH) supported by policy makers through the creation and broad distribution of recommendations for ethical media reporting about mental disorders.

**Results:** In 2019 Task Force appointed by both entities' ministries of health in BH developed an publication with recommendation for ethical reporting about mental health topics with special highlights on specific mental disorders (schizophrenia, depression, suicide, addictions, etc.). It was widely distributed to media and health institutions in the country and was officially adopted as the recommendation of the national Regulatory Agency for Media. Trough five rounds of educational workshops in 2019 and 2021 more than 150 media and mental health professionals were introduced with the publication as well as practical implementation of this recommendations (as is exercises of giving statement).

**Conclusions:** In BH is developed very useful tool for more quality media reporting about MH topics as one of important ways for reducing the stigma and discrimination of people with mental disorders as well as promotion of good mental health

**Disclosure:** No significant relationships.

**Keywords:** Media; mental health; Ethics

## EPP0756

### In vitro fertilization and a patient in compulsory psychiatric treatment in the community

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**Introduction:** INTRODUCTION: According to the Universal Declaration of Human Rights, everyone has the right to start a family. Under the Slovenian Infertility Treatment Act, everyone has the right to infertility treatment. A case of a patient in compulsory