

## EPV1601

### Suicide and Related Factors in Parkinson's Disease

G. Çakar<sup>1\*</sup>, B. Duman<sup>2</sup>, C. Akbostancı<sup>3</sup> and H. Kumbasar<sup>2</sup>

<sup>1</sup>Aksaray University Training And Research Hospital, Psychiatry, Aksaray, Turkey; <sup>2</sup>Ankara University Faculty of Medicine, Psychiatry, Ankara, Turkey and <sup>3</sup>Ankara University Faculty of Medicine, Neurology, Ankara, Turkey

\*Corresponding author.

doi: 10.1192/j.eurpsy.2022.2186

**Introduction:** Parkinson's disease (PD) is a progressive, neurodegenerative nervous system disease. Psychiatric symptoms are common in PD, it is important to consider the suicide risk of these patients.

**Objectives:** The aim of this study is to investigate the risk of suicide in PD with a case control study and to determine the factors that may be associated.

**Methods:** 126 Parkinson's patients and 117 age, gender matched healthy controls were included. Montreal Cognitive Assessment Scale (MoCA), Suicide Probability Scale (SPS), Beck Hopelessness Scale (BHS), Apathy Rating Scale (AES) and Multidimensional Scale of Perceived Social Support (MSPSS) were completed by participants. The PD group completed Parkinson's Disease Quality of Life Questionnaire (PDQ-39) and data on disease duration, Movement Disorders Society-Unified Parkinson's Disease Rating Scale (MDS-UPDRS), levodopa-equivalent daily doses (LEDD) were obtained. Hamilton Anxiety Rating Scale (HAM-A) and Hamilton Depression Rating Scale (HAM-D) were administered to all participants.

**Results:** SPS total scores were significantly lower and total scores of HAM-A, HAM-D and MSPSS were found to be significantly higher in the PD group. There was no significant difference between the two groups in terms of BHS total scores. In PD group a linear relationship was found between SPS total scores and BHS, PDQ39, HAM-A and HAM-D and an inverse relationship with AES. In the regression analysis, it was concluded that a one-unit increase in BHS total scores increased the probability of suicide by 17.1%.

**Conclusions:** It is seen that SPS scores in patients are lower than controls and observed that SPS is correlated with hopelessness, depression, anxiety and quality of life. Although the possibility of suicide is found to be low in PD, this risk increases in patients with untreated depression and anxiety. Therefore, psychiatric evaluation may be recommended in these patients.

**Disclosure:** No significant relationships.

**Keywords:** Depression; Suicide; hopelessness; Parkinson's Disease

## EPV1600

### Moral Injury and Suicide Ideation Among Combat Veterans: The Role of Trauma-Related Shame and Collective Hatred

Y. Levi-Belz<sup>1\*</sup>, G. Zerach<sup>2</sup>, G. Schwartz<sup>1</sup> and E. Halperin<sup>1</sup>

<sup>1</sup>Ruppin Academic Center, The Lior Tsfaty Center For Suicide And Mental Pain Studies, Emek Hefer, Israel and <sup>2</sup>Ariel University, Psychology, Ariel, Israel

\*Corresponding author.

doi: 10.1192/j.eurpsy.2022.2187

**Introduction:** Exposure to potentially morally injurious events (PMIEs) among combat veterans has been acknowledged as a significant stressful combat event that may lead to mental health problems, including suicide ideation (SI). Several studies have examined the risk and protective factors that can explain the

conditions in which PMIEs may contribute to the development and maintenance of SI. However, the contribution of social-emotional factors has yet to be examined.

**Objectives:** In the current study, we examined the association between PMIE-Self and SI among combat veterans and explored the mediating role of trauma-related shame and the moderation role of collective hatred in this association.

**Methods:** A volunteer sample of 336 Israeli combat veterans was recruited, completing self-report questionnaires in a cross-sectional study.

**Results:** indicated that PMIE-Self was positively associated with SI, and trauma-related shame mediated this association. Moreover, collective hatred moderated both their direct (PMIE -SI) and indirect (PMIE-Shame-SI) association. Notably, collective hatred had an inverse role for each of the associations. Thus, collective hatred was found to comprise both a risk and a protective factor for SI following PMIE-Self.

**Conclusions:** The current findings highlight the crucial contribution of trauma-related shame and collective hatred to the association between moral injury and suicidality. Moreover, the findings demonstrate that even years after their military service release, combat veterans exposed to PMIEs may still feel consumed by painful memories and maintain premonitions of a foreshortened future. Furthermore, the findings help to better understand the dynamics of collective hatred and the challenge of modifying it.

**Disclosure:** No significant relationships.

**Keywords:** trauma-related shame; Moral Injury; suicide ideation; Veterans

## EPV1601

### Associated factors of repeated suicidal behavior

O. Charaa<sup>1\*</sup>, A. Aissa<sup>2</sup>, N. Sayari<sup>1</sup>, Z. Yosra<sup>1</sup>, S. Meddouri<sup>2</sup>, U. Ouali<sup>1</sup> and R. Jomli<sup>1</sup>

<sup>1</sup>Razi hospital, Psychiatry A Department, manouba, Tunisia and <sup>2</sup>Razi hospital, Psychiatry A Department, Manouba, Tunisia

\*Corresponding author.

doi: 10.1192/j.eurpsy.2022.2188

**Introduction:** Suicide is a dramatic suicidality complication and a significant worldwide public health problem. Sixty percent of suicidal deaths are preceded by at least one suicide attempt.

**Objectives:** to search and estimate the factors predicting a suicidal recidivism

**Methods:** We conducted a retrospective descriptive survey, achieved in psychiatric department A of Razi hospital on 60 patients hospitalized during a period of 10 years (from January 2010 to December 2019) and have committed at least a suicide attempt. Data collected from medical folders in order to explore sociodemographic and clinical characteristics of the patients.

**Results:** The mean age of the sample was 30 years. A high prevalence of female was objectified. There were a low level of education for 53%, most of patients (55%) were unemployed and came from urban area. Among our patients, 39% attempted suicide for a one time. 61% of patients attempted suicide for several times. The main risk factors related to recidivism of suicidal behavior were unemployment, family history of psychiatric disorders and family instability.

**Conclusions:** The analysis of these results justifies preventive actions in order to face the increase of suicidal recidivism by searching for these associated factors. Therefore, a multidisciplinary intervention approach is required.