

low-middle class, 51.6% from middle class, and 11.2% from upper-middle class.

Substance dependence was identified in 29.2% of the participants: alcohol (20.3%), MDMA (11.1%), cocaine (10.3%), psychopharmaceuticals (4.8%), and hallucinogenic mushrooms (4.0%). No significant differences were found in SDS scale scores for determining dependence thresholds for any substances except for cannabis (Males = 6.13 vs. Females = 1.80,  $t = 3.886$ ,  $df = 83$ ,  $p < .001$ ). A total of 55.6% of males showed substance dependence compared to 25.7% of females ( $X^2 = 6.853$ ,  $df = 1$ ,  $p = .009$ ).

**Conclusions:** This study highlights a concerning prevalence of drug use and substance dependence among university students majoring in Social Education at the university, with certain gender-based consumption pattern differences. These findings emphasize the urgency of intervention approaches targeting mental health and substance prevention in this specific population.

**Disclosure of Interest:** None Declared

## EPP0277

### Unmasking the Dual Threat of Fentanyl and Xylazine Abuse in America

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**Introduction:** The United States of America are currently facing a public health crisis characterized by the abuse of synthetic opioids, notably Fentanyl, and the veterinary sedative Xylazine. While each of these substances has been associated with significant risks, their current misuse presents a formidable challenge to healthcare professionals, law enforcement agencies and policymakers. While the opioid epidemic has long held the nation in its grip, the emergence of Xylazine as complementary agent in substance abuse has added a disturbing layer of complexity to an already terrible situation, due to its cost-cutting, an increase in its addictive properties and its ability to extend the duration of the opioid with which it is combined.

**Objectives:** The authors intend to review the relevant and current literature in order to extend the knowledge about this condition and find the best conducts for clinical practice.

**Methods:** Non-systematic literature review

**Results:** Various regions of the United States are facing a troubling surge in the co-abuse of Fentanyl, a potent synthetic opioid many times more potent than morphine, and Xylazine, a veterinary sedative and muscle relaxant, particularly in urban areas. The motivations for this combination appear to vary, ranging from the enhanced euphoria to cost-saving measures, further fueling its prevalence. However, the consequences are devastating. Both substances depress the central nervous system, with a sharp increase in overdose deaths and emergency medical services are strained to their limits in responding to these crises. Law

enforcement agencies are facing a daunting task in curtailing the distribution of these substances, often grappling with clandestine networks that exploit the accessibility of these drugs.

**Conclusions:** The concurrent abuse of Fentanyl and Xylazine represents a critical public health challenge in the United States of America, demanding immediate attention and a multidisciplinary response. Failure to address this issue comprehensively will have profound implications for the well-being of individuals, families and communities across the nation. It is imperative to mobilize resources, foster interdisciplinary collaboration and develop evidence-based policies to combat this dual-threat crisis. Novel intervention strategies, including community education programs, targeted outreach efforts, and supervised consumption facilities, are urgently needed to address this complex issue.

**Disclosure of Interest:** None Declared

## EPP0278

### An LC-MS/MS method for the determination of W18 in urine samples

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**Introduction:** Synthetic drugs pose one of the most significant drug problems worldwide. In this category, W18 emerges as a potent drug of abuse chemically related to fentanyl. W18 has an analgesic potency 10,000 times greater than morphine. Recent in-vitro studies reported no activity of W18 towards opioid receptors. However, its presence in seized drug samples indicates its use as a precursor in fentanyl synthesis. This emphasizes the need to develop methods for its detection in developing countries dealing with emerging new drugs.

**Objectives:** To develop an analytical method for the determination of W18 in urine samples.

**Methods:** Standards with W18 concentrations ranging from 5-500 ng/ml were prepared in negative urine along with deuterated internal standard. The samples were diluted with methanol, centrifuged and the supernatant was subjected to Liquid chromatography-tandem mass spectrometry (LC-MS-MS) with time of flight (QTOF) analysis. For chromatographic separation, a C18 column with 50 degrees oven temperature was used. The mobile phase consists of formic acid, water, and acetonitrile. The TOF MS was operated in positive ion mode and multiple reaction monitoring was used for quantification.

**Results:** The retention time of W18 was obtained at 9.57 minutes. The parent ion with molecular weight 422.1 along with precursor ions Q1-273, Q2-111.0, Q3-150.0 g/mol were measured. The area of the standards ranges from 1 to 9.0 log 5 with R square of 0.99. The limit of detection (LOD) and quantitation were 5 and 20 ng/ml respectively. The recovery of W18 was estimated to be 96% from the from spiked urine standards.

**Conclusions:** The developed method is able to detect W18 presence in urine samples. This method has the potential to be used in clinical and research studies.

**Disclosure of Interest:** None Declared

## Anxiety Disorders and Somatoform Disorders

### EPP0280

#### Assessment of the intensity of state-trait anxiety of children with cancer

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**Introduction:** Children with cancer face many difficulties on a daily basis which place them at increased risk of developing anxiety and discomfort.

**Objectives:** To assess the intensity of state-trait anxiety in children with cancer.

**Methods:** The sample of the study consisted of 100 children from Greek Children's Hospital, aged 8-16 years, of which 56 had cancer, representing the study group while the control-group was 44 in an outpatient clinic with endocrinological problems. Data were collected by the completion of the questionnaire "State-Trait Anxiety Inventory for children" by Ch. Spielberger. Statistical package S.P.S.S. was used for statistical analysis. 22 and the statistical test, t-test and anova. The significance level was set at  $p < 0.05$ .

**Results:** Of the total sample, sarcoma 38%, brain Ca 14%, 48% endocrine problem, and the largest percentage (57%) were aged 8-10 years. Children with cancer in 44.6% were under treatment and 55.4% in remission or recovery. Body image change was experienced by the 44%. The mean value of the state anxiety was  $30.3 \pm 5.4$  and trait was  $35.3 \pm 6.9$ . Children with cancer experienced lower levels of state anxiety compared to control group,  $p = 0.049$ , and did not differ in terms of trait anxiety,  $p = 0.060$ . In the total sample, girls experienced trait anxiety of the highest intensity,  $p = 0.018$  and children aged 14-16,  $p = 0.020$ . No statistically significant differences were found in relation to the type of cancer in both state and trait anxiety,  $p = 0.096$  and  $p = 0.424$ , in relation to the phase of the disease and the change of body image,  $p > 0.05$ . Children whose fathers were of higher education experienced less anxiety and differed significantly from those of primary and secondary education,  $p = 0.036$  and  $p = 0.021$ , respectively. Comparison between control group and study group in relation to gender, showed that girls with cancer experienced trait anxiety of higher intensity,  $p = 0.029$  but children between 14-16 years from the control group experienced trait anxiety of higher intensity,  $p = 0.030$ .

**Conclusions:** Children of both groups experienced mild to moderate anxiety and its intensity was related to socio-demographic factors of the children and their parents.

**Disclosure of Interest:** None Declared

### EPP0281

#### Psychiatric disorders in patients with rheumatoid arthritis

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**Introduction:** Rheumatoid arthritis (RA) is a systemic inflammatory disease that can lead to significant morbidity and especially to psychiatric disorders. Depression and anxiety are common symptoms in RA patients, and seem to influence disease activity, pain, and treatment response.

**Objectives:** The aim of this study was to investigate the prevalence of depression and anxiety and their related factors in RA patients.

**Methods:** 100 patients diagnosed with rheumatoid arthritis according to ACR1987 or ACR/EULAR criteria 2010 were investigated. Demographic, clinical and laboratorial data were obtained from hospitals records.

The RA severity Disease Activity was assessed by the Disease Activity Score (DAS 28). Physical function was assessed by the Health Assessment Questionnaire-Disability Index (HAQ).

The Hospital Anxiety and Depression Scale (HAD a/d) was used to evaluate the depression and anxiety symptoms. Patients with results greater than 11 are considered depressed or anxious.

**Results:** The group studied included 87% of women and 13% of men. The median age was 55.2 years [27-83]. The median disease duration was  $11.7 \pm 8.9$  years.

The majority of the patients were unemployed, they were housewives in 65% of the cases, retired in 6% and 2 % had taken sick leave. The median ESR was  $44 \pm 31.6$  mm, and the median of CRP level was  $26 \pm 35.3$  mg/l. The median disease activity (DAS 28) was  $4.6 \pm 1.4$ . Forty-five % had moderate disease activity ( $3.2 \leq \text{DAS } 28 \leq 5.1$ ), and 27% of the sample had high disease activity ( $\text{DAS } 28 > 5.1$ ). The mean of the HAQ was 1.1 [0-3].

The anxiety and depression questionnaire (HAD a/d) showed means of 10.6 for depression, and 10.25 for anxiety respectively. Depression was presented in 46 % of RA patients. Anxiety was presented in 48 %.

There was a correlation of HAD a/d with employment status ( $p < 0.05$ ), and functional disability (HAQ) ( $p < 0.001$ ).

There was no significant association of anxiety and depression scales with RA disease activity.

**Conclusions:** Chronic inflammation impairs the physiological responses to stress, resulting in depression, anxiety which leads to a worse long-term outcome in RA.

Physical disability and social factors, are predictive of psychiatric disorders in RA. This fact must be taken into account when evaluating therapeutic response.

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