

(EFs) and (b) gaming urge. We mainly searched the PubMed and Web of Science databases using relevant keywords. All retrieved literature were assessed for eligibility to reduce selection biases.

**Results:** Our preliminary review identified that GD features prominent deficits in EFs, including cognitive inflexibility, poor response inhibition, altered decision-making, and intensified susceptibility to game-related stimuli. These deficits were found to be associated with abnormal neural activity in brain regions subserving EFs and reward-based learning. Hence, excessive gaming may maladaptively suppress controlled and conscious processing, which can amplify automatic and implicit processes to develop gaming urges. In addition, many of these neuropsychological deficits have been observed in other addictions and seemingly unrelated disorders such as autism spectrum disorder (ASD). Similar EF deficits have been identified in ASD, which involve reduced cognitive flexibility and related dysfunction, including excessive attention focus, restricted interest, maladaptive reward processing, and reduced self-control. However, there is considerable variation among individuals and study methods, which requires more comprehensive research strategies.

**Conclusions:** We elucidated comparable cognitive features among individuals with GD, addiction disorders, and ASD. These similarities provide clues regarding GD etiology, ideas for improving preventative therapies, and markers for risk evaluation. Additional investigations on how GD and other disorders possess similar and distinctive cognitive functions are worth pursuing. It is also crucial to further examine the extent of shared cognitive features in the general population, wherein the peripheral pathological characteristics lie on a continuum with typical and atypical populations.

**Disclosure of Interest:** None Declared

## EPP0548

### Depressive disorders and intravenous drug use in chemsex context

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**Introduction:** Several studies have called attention to the mental health disorders associated with chemsex -the intentional use of drugs before or during sexual intercourse GBMSM (gay, bisexual and men who have sex with men) population-. Sexualized intravenous drug use is also known as slam or slamsex. There are few studies that analyze the mental health differences between intravenous drug users compared to non-intravenous drug users in chemsex context.

**Objectives:** We aim to describe the mental health outcomes including current and past depressive disorders diagnosis in a sample of users with sexualized drug use (chemsex) attended by the non-governmental organization Apoyo Positivo in the program “Sex, Drugs and You” and to compare the differences of current and previous diagnosis of depressive disorders between intravenous drug users compared to non-intravenous drug users.

**Methods:** A cross-sectional descriptive analysis of a sample of users attended by the non-governmental organization Apoyo Positivo in the program “Sex, Drugs and You” between 2016-2019 was performed.

**Results:** We included 217 participants. Current or past diagnosis of depression was found in 137 participants. Depressive disorders were significantly higher in the intravenous drug use group compared to the non-intravenous drug use group ( $p < 0.05$ ).

**Conclusions:** Our study reports high levels of depression in chemsex users. The participants in our sample who engaged in intravenous drug use presented a higher frequency of depressive disorders than non intravenous drug use participants. Further studies analyzing the relationship between chemsex, slamsex and depression are needed. A multidisciplinary team is necessary to address chemsex and provide care and mental health treatment to chemsex users.

**Disclosure of Interest:** None Declared

## Anxiety Disorders and Somatoform Disorders

### EPP0549

#### Prevalence of Generalized Anxiety Disorder Among Five European Countries Before and During COVID

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**Introduction:** Globally, there is a mental health crisis, and anxiety is the most prevalent mental health condition. However, the impact of the COVID-19 pandemic (COVID) on generalized anxiety disorder (GAD) prevalence has not been quantified across European countries, and such impact could establish a new baseline of GAD estimates in European countries.

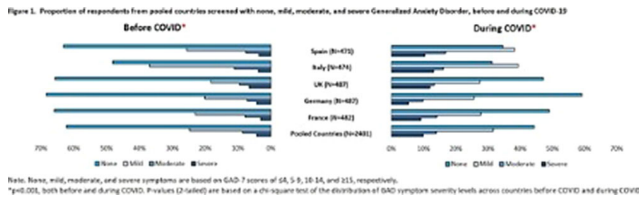
**Objectives:** To assess GAD by severity level before and during COVID in 5 European countries, using the 7-Item GAD Questionnaire (GAD-7).

**Methods:** Adults (age 18+) in France, Germany, UK, Italy, and Spain completed a short survey in May 2020 to assess the impact of COVID on their mental health. All respondents had previously participated in the National Health and Wellness Survey, a nationally representative survey of the adult general population in each country, before COVID (December 2019–March 2020). In both surveys, respondents completed the GAD-7. GAD symptoms were defined by GAD-7 score as mild (5-9), moderate (10-14), and severe GAD ( $\geq 15$ ). Positive screen was defined as GAD-7 score  $\geq 10$ . Positive screen and GAD symptom severity prevalence were reported for the pooled European sample and by country, both before and during COVID. Chi-square and McNemar’s tests were used to evaluate the difference in GAD severity across countries and changes over baseline in GAD positive screen during COVID. P-values were reported for both tests.

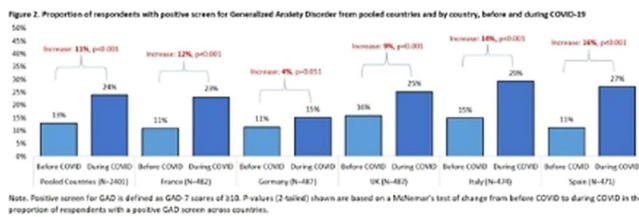
**Results:** In total, 2401 adults were included in analysis (France,  $n=482$ ; Germany,  $n=487$ ; UK,  $n=487$ ; Italy,  $n=474$ ; Spain,  $n=471$ ). Prior to COVID, 311 (13%) screened positive for GAD, with 208 (9%) moderate and 103 (4%) severe in the pooled European sample. During COVID, the distribution of GAD symptoms almost

doubled, as 576 (24%) screened positive for GAD, and shifted towards greater severity with 337 (14%) moderate and 239 (10%) severe in the pooled European sample (Figure 1). Before COVID, the prevalence of positive screen ranged from 11% (France, Germany, Spain) to 16% (UK). Statistically significant increases in positive screen over baseline levels were observed across all countries ( $p < 0.01$ ), except Germany. Spain was the most impacted by COVID (increase: 16%), followed by Italy, France, and UK (increase: 14%, 12%, and 9%, respectively). Germany was the least affected, overall (increase: 4%) (Figure 2).

**Image:**



**Image 2:**



**Conclusions:** During COVID, estimates of positive screen for GAD increased substantially to 24% across 5 European countries. Surges in positive screen and GAD symptom severity were observed in all 5 countries, with more profound impact in Spain, Italy, France, and UK. With new baseline GAD estimates, the country-specific data of COVID impact on GAD could help to inform appropriate allocation of mental health resources.

**Disclosure of Interest:** D. Karlin Employee of: MindMed, S. Saponic Shareolder of: Eli Lilly, Stryker, Abbott, Amgen, Consultant of: MindMed, Becton Dickinson Company, CSL Behring, N. Chen Consultant of: MindMed, C. Steinhart Employee of: MindMed, P. Duong Employee of: MindMed

**EPP0551**

**Sociodemographic factors as a predictor for pregnancy-related anxiety**

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**Introduction:** Pregnant women are particularly vulnerable to a wide variety of psychiatric symptoms, including anxiety related to pregnancy and childbirth.

**Objectives:** The purpose of our study was to determine the socio-demographic characteristics of pregnant women and investigate their relationship with pregnancy-related anxiety.

**Methods:** The study was conducted from February to July 2023 among pregnant women in their 3rd-trimester consulting at the Gynecology-obstetrics department of the Hedi Chaker University Hospital of Sfax, Tunisia. Women with obstetric conditions favorable to vaginal delivery (cephalic presentation and eutrophic fetus) were interviewed using a questionnaire including their sociodemographic characteristics and the brief version of the pregnancy-related anxiety questionnaire PRAQ-R2.

**Results:** A total of 350 women were included in our study. The mean age of the participants was 28 years [16-41 years] with the majority being married (95.7%). One hundred and eighty-eight women (53.7%) did not graduate from high school and 213 (60.9%) were housewives. Half of the participants (52.9%) lived in the city, and 38.9% reported low income. Almost half of them (46.28%) were multiparous.

The mean score of the PRAQ-R2 was 31.24 ± 7.53.

We found a positive correlation between the PRAQ-R2 scale score and age younger than 30 years ( $p < 0.001$ ), low educational level ( $p = 0.006$ ), and low income ( $p = 0.031$ ).

**Conclusions:** Our findings suggest that demographic factors seem to predict anxiety related to pregnancy and are worth examining in future studies for a better understanding of this symptom in pregnant women.

**Disclosure of Interest:** None Declared

**Bipolar Disorders**

**EPP0554**

**Drug repurposing as add-on treatment strategy for mania and bipolar depression: systematic synthesis and qualitative appraisal of the existing meta-analytic evidence**

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**Introduction:** In the complex pathophysiology of bipolar disorder (BD), increasing evidence supports the involvement of neurobiological abnormalities beyond the classical ones, suggesting them as potential alternative therapeutic targets. Several drugs approved for different indications have thus been repurposed for the treatment of BD, all of them supported by a plausible biological rationale. Some recent reviews have provided an update on these possible additional treatment options for mania and bipolar depression, but no systematic synthesis and qualitative evaluation of meta-analytic findings has been made.

**Objectives:** To provide a guidance on the available evidence on these treatments and their potential role in clinical practice, we