

(PPP), a severe episode of affective psychosis usually occurring soon after birth, has known risk factors. CPMHS offer assessment and interventions for women with risk factors for PPP, with a view to reducing the risk of its occurrence, as well as, where necessary, to proactively manage the illness to minimise the impact on the mother-infant dyad, as well as associated risks to self and/or others.

**Objectives:** To review the rate of PPP in women with established risk factors, who were referred and managed by our CPMHS between September 2019-September 2021. This rate will be compared with the known rates of PPP reported in the literature. Rates of non-psychotic relapse, acute hospitalisation, children social care supervision and mother-infant separation as a result of postnatal relapse will be (amongst others) secondary outcomes. Perinatal interventions offered to reduce the risk of PPP and contingency planning will also be reviewed.

**Methods:** This will be a retrospective case review study involving women referred and cared for by our CPMHS from October 2019 to October 2021, with known risk factors for PPP. Women identified as high risk for PPP receive consultant led-care in our service, therefore cases will be identified via the individual caseloads. Subsequently, electronic case notes will be reviewed to determine the primary and secondary outcomes, as well as the perinatal interventions that were offered.

**Results:** To be reported.

**Conclusions:** To be reported.

**Disclosure:** No significant relationships.

**Keywords:** Post-Partum Psychosis; Mother and Baby Unit; Bipolar Affective Disorder; Perinatal

**EPV1654**

**Clinical and psychopathological profile of Tunisian Women victims of domestic violence**

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**Introduction:** Partner violence is a serious public health problem. International studies have well-explored the psychological aspects of domestic violence, but few explored the clinical profile of women victims of violence

**Objectives:** To define the clinical and psychopathological profile of women victims of domestic violence

**Methods:** We contacted 75 women who consulted at the psychiatric emergency of 'HediChaker hospital' Sfax -Tunisia whowhere consulting in the context of medical expertise for domestic violence, on the period between May until October 2021 An anonymous survey was asked to these ladies

**Results:** The age oscillates between 18 and 64 years 86.7% of the participants were married for the first time, and 24% had at least one child. In 48% of the cases, the victims and their partners had an average socio-economic level. 66.7% don't have a job. 6.7 % had toxic habits: 5.3% were smoking 22.7% had psychiatric follow: 14.3% for depressive disorder, 7% for bipolar disorder and 1.4% for anxiety Following a physical assault by the spouse, 37.3% of women consulted medical emergency and 21.3% consulted psychiatric emergency. The prevalence of potentially traumatic life events was 29.3%:16% were victim of parental violence and 13.3% suffered from sexual abuse.

**Conclusions:** This study shows that the prevalenceof domestic violence is higher among young working women. This work

underlines also the necessity of a systematic screening of different aspects of violence in emergency medical or psychiatric servicesin order to provide for these ladies the necessary psychological support

**Disclosure:** No significant relationships.

**Keywords:** Tunisian-women; profile; domestic-violence; clinical

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**Beliefs about pregnancy and its implications regarding self-care in the diet of a population group from Montería, Córdoba**

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**Introduction:** Pregnancy has sociocultural implications that lead to conceiving it depending on the cultural context (Noguera & Rodríguez, 2008). Self-care is a cultural practice associated with the well-being of mother and child during pregnancy (Carmona, Hurtado and Marín 2007). Being relative to culture, self-care varies according to current beliefs. Beliefs are the concretion of a way of thinking about the environment that surrounds us (Peirce, 1903).

**Objectives:** Analyze the beliefs of women from a population group in Montería, about pregnancy and its implications regarding self-care in eating.

**Methods:** Qualitative approach. Sources: primary. Sample: due to saturation, 15 pregnant women assigned to the Mocarí neighborhood hospital in Montería. Instrument: semi-structured open interview. The information was processed through AtlasTi, implementing content analysis. Emerging categories: contents, routines in food.

**Results:** Main belief: food affects the well-being of mother and child. It is adequate or inappropriate depending on categories such as content and routines. The former refer to the food consumed, the latter indicate the times of consumption.

Semiotic matrix of beliefs about pregnancy			
Beliefs	Mental habits	Projected longings	Actions
Food affects the development of pregnancy (mother and child health)	Contents	Suitable nutrition	Varied food intake Intake of nutrients that contribute to the proper development of pregnancy consult experts
		Unsuitable nutrition	Intake of food not adequate for the development of pregnancy Own criterion
	Routines	Suitable nutrition	Meals at defined and appropriate times Consult experts
		Unsuitable nutrition	Meals at irregular and inappropriate times Own criterion

**Conclusions:** Beliefs about pregnancy operate as generators of mental habits, projected wishes and concrete actions. Therefore, they are an important starting point for the implementation of self-care practices at the institutional level.

**Disclosure:** No significant relationships.

**Keywords:** food; beliefs; self-care; Pregnancy