

and reward obtained at work leads to experiencing a stressful work environment.

**Methods:** 153 shift working female nurses completed a short questionnaire about work schedule, the Effort-Reward Imbalance questionnaire with the Overcommitment (OC) scale and the Insomnia Severity Index (ISI). To estimate the mediating effect of OC on the association between ERI and ISI, we conducted a mediation analysis using PROCESS v3.4 macro in SPSS.

**Results:** The model including ERI and OC accounted for 12.25% of the variance in ISI scores. ERI significantly predicted OC and OC significantly predicted insomnia. The direct effects of ERI on ISI remained significant after controlling for the effects of overcommitment. 35.07% of the effect of ERI on ISI was through OC.

**Conclusions:** Ability to detach from work-related thoughts during leisure time is crucial for successful recovery from occupational stress. The research is supported by a grant no. 2019/33/N/HS6/02572 from the National Science Center in Poland.

**Disclosure:** No significant relationships.

**Keywords:** occupational stress; Insomnia; overcommitment; Shift Work

## EPV0662

### Unravelling a couple in conflict: Undiagnosed obstructive sleep apnea

I. Ganhao

Clinic 6, Centro Hospitalar Psiquiatrico de Lisboa, Lisbon, Portugal  
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**Introduction:** Obstructive sleep apnea impacts quality of sleep and leads to sleep deprivation with consequences on level of general functioning and interpersonal relationships besides the known contribution to cardio and cerebrovascular disorders and sexual dysfunction. Most adults sleep with a partner and sleep disorders may also disrupt the partner's sleep, yet surprisingly obstructive sleep apnea, even when such is the case, goes frequently undiagnosed.

**Objectives:** To reflect on a clinical case that presents apparently as just another couple in conflict but in fact when unravelled leads to a diagnosis of obstructive sleep apnea that may have significant contribution to the conflict.

**Methods:** Unravelling what was at the core of a couple in conflict.

**Results:** A heterosexual couple in their late thirties present in serious conflict with each other. Both are depressed and anxious, sleeping badly, with intimacy issues and having trouble dealing with work obligations and household chores. After continued squabbling, some self-reflection but mostly other blaming, a thread released by the female partner leads to sleep evaluation of the male partner with a resulting diagnosis of obstructive sleep apnea and subsequent treatment. And the couple relationship got better...

**Conclusions:** Obstructive sleep apnea is frequent in the general population and more often than not undiagnosed but may be even more frequent in patients seeking mental health services. A sleep history is an important part of evaluation of patients who present with anxiety, depressive, sexual function and/or cognitive complaints and relationship issues. Interviewing intimate partners may provide essential clues to the possibility of existing sleep disorders.

**Disclosure:** No significant relationships.

**Keywords:** intimate partners; couple in conflict; obstructive sleep apnea

## EPV0663

### A case of incubus phenomenon

L. Tjokrodipo\*, A. Sneep and P. Michielsen

A-opleiding, GGZ Westelijk Noord-Brabant, Halsteren, Netherlands

\*Corresponding author.

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**Introduction:** The incubus phenomenon is a paroxysmal sleep-related disorder in which patients experience sleep paralysis and compound hallucinations. The symptoms of this phenomenon contain: sensed presence, fear, visual and auditory hallucinations, unusual body experiences such as out-of-body experience and feelings of floating/paralysis, experiencing a pressure on the thorax, difficulties breathing and a feeling of pain(1). This phenomenon appears to be universal, but has different cultural explanations(2).

**Objectives:** We present a case of possible incubus phenomenon to raise awareness about this specific condition.

**Methods:** A literature search in English was performed using PubMed with the following mesh term: 'incubus phenomenon'.

**Results:** We present a 29-year old man, known with an intellectual disability (IQ=74), psychotic disorder and a cannabis use disorder. After neurological examination, he was diagnosed with narcolepsy and cataplexy. Over the past weeks there had been an increase of hallucinations that appear before, during or after sleep. The patient's thoughts included sexual approaches by caregivers, difficulties in breathing and a moving sensation while laying down in bed and experiencing pressure on the thorax assuming a woman was sitting on his chest. Literature search shows a lifetime prevalence of 0.11 % in general population versus 0.41 % in psychiatric patients(2.)

**Conclusions:** Literature review shows only a few cases describing the incubus phenomenon. The prevalence is four times higher in patients with a psychiatric history(2) and should not be confused with psychotic disorder. Recognizing is important for proper treatment, as reoccurring attacks can be treated with anxiolytics, antidepressants, anticholinergics or anti-epileptics, and sleep hygiene methods(1.)

**Disclosure:** No significant relationships.

**Keyword:** incubus phenomenon

## Addictive disorders

### EPV0664

#### Women substance use in india: An important but often overlooked aspect

R. Tripathi

Psychiatry, All India Institute of Medical Sciences, Gorakhpur, Gorakhpur, India

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