

Introduction: Perinatal grief is the process that occurs after the loss of a baby, either during pregnancy or during the period immediately before or after childbirth (up to a year). In recent years, the increase in specific training and development of programs focused on perinatal mental health has facilitated the creation of specific action protocols. The case of a 38-year-old woman who suffers a gestational loss during the third month of pregnancy is explored. The presence of personal and family antecedents that suppose risk factors for the adequate elaboration of the duel, raise doubts about the handling of the case.

Objectives: This work has several objectives, including reviewing the published literature on perinatal bereavement in an emergency situation and, on the other hand, presenting a case.

Methods: A bibliographic search has been carried out in the main sources of medical information such as pubmed, uptodate as well as in national and international journals. Likewise, the knowledge and clinical experience of the team has been reviewed in order to expose its own experience in this field, defining specific interventions as well as results.

Results: On evaluation, the patient was conscious and oriented to person, time, and space. Approachable and cooperative. Overall calm, although with intermittent crying. Low mood reactive to vital situation, without apathy, apathy, or anhedonia. No previous episodes of hypomania or mania. Not another major affective clinic. Fluid and coherent speech, formally well constructed without glimpse alterations in the course or content of thought. She denied sensory-perceptual alterations, without showing a listening attitude, or suspicion or any other psychotic or dissociative symptoms. He denied ideas of self-harm, death or self-harm, presenting an adequate request for help and coherent and realistic future plans. Altered biological rhythms with insomnia of three days of mixed pattern evolution. preserved appetite. Judgment of reality preserved.

The grief reaction is an experience that must be normalized after the loss of a loved one. However, given the risk factors presented by the patient, preventive management is established in the face of possible complicated perinatal grief. A new appointment is established in less than 10 days to reassess the case with the perinatal mental health team.

Conclusions: Perinatal mental health is an area of knowledge that could provide assistance to mothers, fathers and family systems plunged into a crisis of perinatal grief.

Prevention in situations of possible complicated perinatal mourning is no less important than treatment when the disorder is already established.

Disclosure of Interest: None Declared

EPV1114

Self esteem among Tunisian women victims of domestic violence

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Introduction: Intimate partner violence is an under recognized problem in our society that is misjudged and often overlooked.

Violence in women has been linked to chronic health, emotional complications, one of which includes low self-esteem

Objectives: To study the prevalence and predictors of low self-esteem among women victims of domestic violence.

Methods: Our study was descriptive and analytical cross-sectional, carried out with women examined in the context of medical expertise, from May until January 2022.

An anonymous survey was asked to these ladies.

The Rosenberg questionnaire was used to assess the self esteem

Results: 122 responses was collected. The average age of the assaulted women in our study was 35.66 years (from 18 to 64 years) 98.4% were victims of verbal violence, 95.1% of physical violence, 97.5% of psychological violence and 54.7 % of sexual violence.

Self esteem was very low among 43.4% of women, low among 18.9%, average among 15.6%, high among 15.6% and very high among 6.6%.

Women with children had lower self-esteem (p=0.02).

Low self-esteem were significantly correlated with: the husband cannabis consumption (p=0.01).

The ladies victims of sexual violence such as an unusual type of relationship had lower self-esteem (p=0.01).

Women who were threatened by their spouses had lower self-esteem (0,01).

An history of aggression during pregnancy was a risk factor for low self-esteem (p=0, 01).

Conclusions: Results suggest domestic violence has on women, not only physically effect but mentally and emotionally, this is why an urgent reaction must be taken by the state to reduce this scourge and hs repercussions on the mental health of the victims.

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EPV1115

Peritraumatic distress associated with domestic violence

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Introduction: The violence against women massively committed by their spouses is a scourge that transcends countries, ethnicities, cultures, classes social and age groups.

This violence is traumatic and represents a serious attack on the physical integrity and mental health of the women who are victims

Objectives: To study the prevalence and predictors of peritraumatic distress among women victims of domestic violence

Methods: We contacted 122 women who consulted at the psychiatric emergency of 'Hedi Chaker hospital', Sfax examined in the context of medical expertise on the period between May 2021 until January 2022

A questionnaire regarding the violence was asked to responders. It included demographic and violence exposure questions and a scale applied during violence 'Peritraumatic distress inventory'

Results: The average age of women assaulted in our study was 35.6 ± 9.94 years (min=18,max=64).

78.7% (n=96) of ladies were of urban origin.

The majority of them (44,3%) had secondary level education.