

## EPV0074

**CANNABIDIOL- PROVOKES OR TREATS ANXIETY DISORDERS?**

H. Arshad<sup>1\*</sup>, A. Arshad<sup>1</sup>, M. Khalid<sup>2</sup>, A. R. Khan<sup>3</sup>, F. Arain<sup>4</sup> and S. Khatri<sup>5</sup>

<sup>1</sup>Psychiatry, Jinnah Sindh medical university, Karachi; <sup>2</sup>Psychiatry, Allama Iqbal Medical College, Lahore, Pakistan; <sup>3</sup>Psychiatry, Carilion Clinic Virginia Tech, Virginia; <sup>4</sup>Psychiatry, Rutgers New Jersey School of Medicine and <sup>5</sup>Psychiatry, Ocean Medical Center, New Jersey, United States

\*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1432

**Introduction:** After the introduction of proposal regarding cannabidiol for the treatment of some psychiatric disorders including anxiety, there is confusion if cannabidiol use is associated with the provocation of anxiety symptoms or it can be safely used for the treatment. In nonmedical terms, (Cannabidiol) Cannabis is referred to as Marijuana and has been considered a potential substance of abuse for ages, that raises few questions for its use as a treating agent. It is an interesting area to be explored.

**Objectives:** Our aim is to find out the implications of Cannabidiol use. We look forward to knowing the mechanism behind cannabidiol being a potential treatment strategy for anxiety.

**Methods:** A literature search was conducted using the search terms [anxiety] OR [cannabis] OR [Marijuana] OR [cannabidiol] OR [tetrahydrocannabinol] OR [phytocannabinoids] OR [panic] OR [generalized anxiety] OR [social anxiety] OR [psychologic distress] OR [psychosis] OR [depression]. The overall search produced 230 results. We included 30 studies relevant to the subject in this review.

**Results:** Results revealed that anxiety is highly prevalent in individuals with a history of cannabidiol use in comparison to non-users. Symptoms of stress are more pronounced with more frequent cannabidiol use. Chronic users present with more severe symptoms like palpitations and the constant restlessness that are difficult to be managed. The potential role of Cannabinoids in reducing the conditioning of fear can be considered one of the reasons for investigations being done on it. Cannabidiol (Cb1) receptor plays a potential role in producing anxiolytic effects. The side effects of first-line drugs like distorted body shape due to weight gain, sexual health concerns and resistance along with frequent relapses, available for managing anxiety disorders are one of the reasons to consider alternative substances. Though, human testings are still underway, animal models are used currently for experimentation purposes and show positive anxiolytic effects of cannabidiol.

**Conclusions:** There is increased need to investigate necessary chemical and physiologic changes that are produced within the body in response to cannabidiol use. More investigations should be done on human subjects along with animal studies. Proper guidelines should be shared with practicing physicians so that new and pretested ways are open for the treatment of resistant cases with proper implications of knowledge in clinical settings so that there is minimal chance of abuse of potentially addictive chemicals.

Keywords: Cannabis, Cannabidiol, anxiety, treatment, provocation.

**Disclosure of Interest:** None Declared

## EPV0075

**dysfunctional breathing and anxiety related disorder**

I. Sohn<sup>1\*</sup> and I. Cho<sup>2</sup>

<sup>1</sup>psychiatry, keyo hospital, Uiwang and <sup>2</sup>psychiatry, imom psychiatric clinic, seong-nam, Korea, Republic Of

\*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1433

**Introduction:** Although dysfunctional breathing is a common symptom in general population and affects qualities of life, it is still underdiagnosed. There are some studies of prevalence of it in asthma, but few studies in mental illness.

**Objectives:** The purposes of this study were to explore the prevalence of it in anxiety related disorders, and to investigate whether anxiety influence it.

**Methods:** 150 patients diagnosed with anxiety or depressive disorders, and 135 controls were recruited. Nijmegen questionnaire was used to assess dysfunctional breathing, and Hospital anxiety depression scale was used.

**Results:** The prevalence of dysfunctional breathing in anxiety related disorders was higher than that in control.

In the linear regression model, anxiety accounted for 61.2 % of dysfunctional breathing, but depressed mood. With covariate adjusted for anxiety, scores of dysfunctional breathing in anxiety or depressive disorders were higher than in controls.

**Conclusions:** Dysfunctional breathing in anxiety related disorders is higher than that in control. Adjusting anxiety, its difference is still. Anxiety affects dysfunctional breathing, but depressed mood does not.

**Disclosure of Interest:** None Declared

## EPV0076

**Psychological factors associated with bruxism in a sample of university students from the Colombian Caribbean**

K. Cabas-Hoyos<sup>1\*</sup>, A. Llinas-Ariza<sup>2</sup> and C. Guerrero-Cantillo<sup>3</sup>

<sup>1</sup>Cognición y Educación; <sup>2</sup>Program of Odontology and <sup>3</sup>Universidad del Magdalena, SANTA MARTA, Colombia

\*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1434

**Introduction:** Within the theories that explain tooth grinding are dental factors, skeletal malocclusions, occlusal anomalies and defective reconstructions, however, there would be psychological factors that explain this phenomenon.

**Objectives:** The aim of the study is to evaluate anxiety, depression and coping responses in university students who self-report clenching or grinding teeth.

**Methods:** Design: Non-experimental, cross-sectional, and quantitative.

Sample: University students (n=25) aged between 18-25 years (mean: 25.3; SD: 2.39), purposive sampling. Participants completed a self-reported questionnaire reporting teeth clenching/grinding habits.