

vulnerabilities or risk/protective factors and postnatal depressive symptoms (PNDS) at 2 months post-partum (PP)

Methods: The data from the French ELFE birth cohort were used. Available information about prenatal psychological status, access to mental health care and vulnerabilities-risk/protective factors for PNDS were collected during the maternity ward stay and at 2 months PP. PNDS were evaluated with the Edinburgh Postnatal Depression Scale (EPDS) at 2 months. Maternal/pregnancy characteristics independently associated with prenatal psychological distress and access to mental health care were explored using multivariate analyses. Pathways between risk/protective factors and PNDS at 2 months were investigated through Structural Equation Modeling.

Results: Of the 15,143 mothers explored in the prenatal part of the study, 12.6% reported psychological distress (PPD), 25% had a prenatal consultation with a mental health specialist, 11% used psychotropic drugs of which 4% had no specialist follow-up. Decreased likelihood to consult a mental health specialist was found in young women, with intermediate educational level and born abroad. PPD was more frequent in women with very low economic status, alcohol/tobacco use, unplanned pregnancy, late pregnancy declaration, multiple and complicated pregnancy. In the postnatal part of the study (n=11,583) partner's perceived antenatal emotional support, consultation with a mental health specialist before pregnancy, financial difficulties, prenatal psychological distress and experience of pregnancy were directly associated with the severity of maternal PNDS at 2 months PP, as well as perceived postnatal support, infant's self-regulation skills, maternal ability to understand infant crying and infant hospitalisation.

Conclusions: Perinatal professional support should begin antenatally and target the couple's prenatal functioning, with particular attention to women presenting history of psychiatric disorders, especially when of low socioeconomic status. After delivery, addressing infant and parenthood characteristics is recommended.

Disclosure of Interest: None Declared

EPP0523

The biological modifications of milk are linked to mental health of mothers of infants affected by bronchiolitis

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Introduction: Breast milk is a dynamic type of nourishment that changes based on the needs of the child. An increasing amount of data suggests that mental health may be an important factor in such modulation. In addition, breast milk contains extracellular vesicles (EVs), which are currently considered an important dynamic system of communication between cells, even of different individuals.

Objectives: Purpose of this article is to investigate whether changes in breast milk in terms of EVs concentrations are related to maternal mental health.

Methods: This is a case-control study for which we enrolled mothers of infants with bronchiolitis (N=33) and mothers of healthy infants (N=13). Breast milk samples were taken and EVs concentrations were quantified. Maternal mental health was assessed by administration of five different psychometric scales: Edinburgh Postnatal Depression Scale (EPDS), State Trait Anxiety Inventory (STAI-S, STAI-T), Barkin Index of Maternal Functioning (BIMF), The Connor-Davidson Resilience Scale 10 items (CD-RISC). Subsequently, scale scores were related to EVs concentrations by negative binomial regressions adjusted for case-control.

Results: As maternal resilience increases, the EVs of neutrophilic origin (p=0.0447) and those of endothelial origin (p=0.0078) decrease¹. In contrast, an increased EPDS score is associated with higher levels of B-lymphocyte EVs (p=0.0376). Scores on the STAI-S scale impact many more populations of EVs²: we observed an increased Incidence Rate Ratio (IRR) of neutrophil-derived EVs (p<0.0001), T-lymphocyte-derived EVs (p=0.0214), NK-cell-derived EVs (p=0.0202), T-reg CD4+ CD25+ (p=0.0141) and endothelial marked EVs (p=0.0180). An increase in STAI-T scale scores also was associated with a significant increase in CD177+ neutrophil-derived EVs (p=0.0028) and endothelial-derived EVs (p=0.0111)³.

Image:

CD-RISC			
FENOTIPO	IRR (Incidence Rate Ratio)	95% IC	P-VALUE
VESCICOLARE			
CD3+	0.950	0.900 1.003	0.0628
CD14+	1.022	0.967 1.079	0.4427
CD177+	0.933	0.873 0.998	0.0447
CD62E+	0.918	0.863 0.978	0.0078
CD4+	0.961	0.908 1.016	0.1573
CD4+ CD25+	0.953	0.898 1.012	0.1141
CD20+	0.951	0.883 1.025	0.1911
HERV+ HLAG+	0.955	0.893 1.022	0.1825
LPS+	0.979	0.924 1.036	0.4624

Image 2:

STAI-S			
FENOTIPO VESCICOLARE	IRR (Incidence Rate Ratio)	95% IC	P-VALUE
CD3+	1.022	1.003 1.042	0.0202
CD14+	1.010	0.992 1.028	0.2666
CD177+	1.048	1.030 1.067	<0.0001
CD62E+	1.023	1.004 1.042	0.0180
CD4+	1.020	1.003 1.038	0.0214
CD4+ CD25+	1.024	1.005 1.044	0.0141
CD20+	1.012	0.985 1.040	0.3746
HERV+ HLAG+	1.012	0.987 1.037	0.3510
LPS+	1.016	0.988 1.044	0.2716

Image 3:

STAI-T			
FENOTIPO VESCICOLARE	IRR (Incidence Rate Ratio)	95% IC	P-VALUE
CD3+	1.013	0.977 1.050	0.4759
CD14+	0.986	0.963 1.010	0.2458
CD177+	1.062	1.021 1.105	0.0028
CD62E+	1.040	1.009 1.072	0.0111
CD4+	1.018	0.990 1.048	0.2114
CD4+ CD25+	1.027	0.996 1.060	0.0873
CD20+	1.012	0.954 1.074	0.6905
HERV+ HLAG+	1.028	0.982 1.076	0.2371
LPS+	1.006	0.961 1.052	0.8105

Conclusions: EVs concentrations in breast milk are associated with maternal mental health. Specifically, stress and related severity of anxiety is able to increase the concentrations of EVs derived from inflammatory cells, which suggests an increase in their number and activity. Further research is needed to confirm these preliminary findings.

Disclosure of Interest: None Declared

EPP0524

Women's emotional dependence on men and its relationship to intimate partner violence

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Introduction: A woman's emotional dependence on a man refers to a marked need for care, protection, and support, even in situations where the woman is able to function autonomously. This dependence fosters a fusional bond that makes it difficult for the woman to leave the relationship, however unhealthy it may be. This puts the victim at greater risk of suffering and tolerating violence, in particular intimate partner violence (IPV).

Objectives: To study the emotional dependence of women who are victims of IPV, and to determine the factors associated with this dependence.

Methods: We conducted a descriptive and analytical cross-sectional observational study, carried out over a 10-month period from March 2021 to December 2021, among female victims of IPV consulting psychiatric emergencies at UHC Hedi Chaker, Sfax, Tunisia for medical expertise at the request of the court.

Emotional dependence was assessed using the Emotional Dependence Questionnaire (EDQ) which contains 20 items. Responses are given on a seven-point Likert-type scale which is recoded so that a high score reflects a high level of emotional dependence in relationships.

Results: The total number of participants was 120 with an average age of 37.27 years. The majority had secondary education or less (62.5%), were professionally active (53.3%), and were financially dependent on their partners (26.7%). As for the women's clinical characteristics, 19.2% were under psychiatric care, 15% had attempted suicide and 10% had a history of childhood abuse. Tobacco was the only psychoactive substance consumed by 12.5% of the women. The average length of marriage was 12.34 years, exceeding 10 years in 44.2% of cases. Marital conflicts had existed since the very beginning of the relationship in 91.7% of cases.

The mean total score of the EDQ was 79.38, indicating a slight emotional dependence of these women on their spouses. It was correlated with childhood violence ($p=0.028$), smoking ($p=0.049$), early conflict ($p<10^{-3}$), and personal psychiatric history ($p=0.02$).

Conclusions: A link, probably bidirectional, may occur between emotional dependence and IPV, particularly a link with maintaining the relationship in an IPV context. However, the slight emotional dependence of our victims may explain why they seek help from the police and report the violence.

Disclosure of Interest: None Declared