Introduction: The relationship between mood disorders, particularly depression and cognitive impairment is complex. The symptoms of depression in the elderly include confusion, sleep alterations, low concentration, cognitive deficits, and somatic complaints that may are also present in dementia, with depression being often a prodrome.
Objectives: The present study aimed at investigating the presence of cognitive disturbances in outpatients over 65 years of age consulting us for a mood episode, as well as to investigate the possible relationships between cognitive and depressive symptoms.
Methods: The study included 57 older patients attending the Psychiatric Clinic of Pisa, with a diagnosis of a major mood episode according to DSM-5 criteria. The psychometric scales included: Hamilton Depression Rating Scale (HAM-D), Beck Inventory Scale (BDI), Geriatric Depression Scale (GDS), to measure the severity of depression; Short Psychiatric Evaluation Schedule (SPES), to assess organic mental deficits; Cornell Scale for Depression in Dementia (CSDD), to assess depression in people with dementia*; Adult Autism Subthreshold (AdAS) Spectrum, to evaluates the eventual presence of specific features of the autistic spectrum disorder(ASD).* Moreover, patients were also assessed for cognitive screening with Montreal Cognitive Assessment (MoCA), Frontal Assessment Battery (FAB), Mini-Mental State Examination (MMSE).
Results: The HAM-D total score was 10.18±6.33, that of BDI 12.79± 9.89, that of GDS 12.69±8.25 and that of CSDD 8.35±6.25. The showed a MoCA value was 21.30±4.86, that of FAB 14.12±3.92, and that of MMSE 25.06±4.20. The MoCA total score positively correlated with those of the FAB and of the MMSE, while the FAB score with the MMSE score. A positive correlation was found between SPES and the HAM-D, BDI, CSDD and GDS total scores. The AdAS score positively correlated with that of MMSE. By correlating scores of depressive dimensions with those of cognitive functions, a positive correlation was noted between FAB total score and those of the HAM-D, BDI, CSDD and SPES
Conclusions: These findings suggest a possible link between the presence of ASD and depressive symptoms from the one side and cognitive performance and executive functions from the another side.

Disclosure of Interest: None Declared

Oncology and Psychiatry

EPP0477

Exploring fertility information needs and preferences in young women diagnosed with breast cancer: a qualitative study

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Introduction: Research has suggested an increased incidence of breast cancer in young women who have not yet completed family-building projects. However, the use of adjuvant therapies with cytotoxic drugs may affect fertility permanently or transiently. Furthermore, women undergoing prolonged adjuvant hormonal therapy have an increased risk of infertility due to the natural aging of the reproductive system during this period. Thus, young breast cancer survivors present fertility and childbearing concerns and related information needs.
Objectives: The present study aimed to know the experiences of breast cancer survivors regarding the information received about reproductive health during cancer diagnosis and treatment and to identify unmet needs and preferences about how and when to receive this information.
Methods: A exploratory qualitative study was conducted using a convenience sample consisting of young women diagnosed with breast cancer aged 18 to 45 years. Semi-structured interviews were carried out individually and online with 24 female Portuguese breast cancer survivors (M=37.21; DP=4.44) between June and August 2022.
Results: From the preliminary thematic analysis of the data, three main themes were identified: 1) information received at the time of diagnosis; 2) unmet information needs, and 3) main preferences. Findings showed that most participants received information related to the impact of treatments on fertility, namely about the gonadotoxic effect of chemotherapy. This information was mostly provided by the nurses, but gaps were still identified. The interviews highlighted that, for most participants, it would be important to receive reproductive health information at an early stage of diagnosis, before treatment begins. Breast cancer survivors addressed the need to build a "uniform information model", as well as booklets that systematize the reproductive impacts of cancer diseases, taking into account the specificities of each type of cancer and associated therapies.
Conclusions: Despite clear indications that fertility is an important issue in the context of breast cancer, the preliminary results of this study suggested that fertility counseling after diagnosis is still limited. There is a need to develop structured interventions that address the reproductive needs and concerns of these patients throughout the course of the disease.

Disclosure of Interest: None Declared

EPP0478

Mixed depression and suicidality in oncology outpatients

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Introduction: Mixed depression (MxD), is a nosologic entity characterized by the presence of excitatory symptoms during a depressive episode. MxD embeds high levels of chronicity, functional impairment and suicidality. The assessment of MxD in a

subpopulation that features high levels of fragility, such as oncology patients, represent a pivotal strategy to reduce illness burden and suicidality in these subjects
Objectives: The aim of the present project is to assess the characteristics of MxD in oncology outpatients and to compare them with those of outpatients without oncological comorbidity.
Methods: Forty-two oncology outpatients with MxD (ONC-MxD); 34 oncology outpatients and inhibited depression (ONC-inhib); 187 outpatients with MxD without oncological comorbidity (MxD); 224 outpatients with inhibited depression without oncological comorbidity (Inhib) and 168 healthy controls (HC) have been recruited. Analyses made include comparisons of demographic and clinical variables, depression severity, excitatory symptoms, suicidality and functional impairment.
Results: Oncology outpatients with depressive disorder showed greater severity of depressive symptoms and greater functional impairment than those without oncological comorbidity (F=187.08; p<.001; F=54.08; p<.001, respectively). ONC-inhib showed greater inhibition than Inhib (p<.001), whereas no differences in levels of excitatory symptoms are present between MxD e ONC-MxD (p=.159). ONC-DMX have a more recent diagnosis of cancer than ONC-inib (F=13.39, p<.001) and higher rates of suicidal ideation (χ^2=11.89; p=.008).
Conclusions: Cancer might worsen depression severity, especially in its inhibitory component. Relationships between onset of cancer, excitatory symptoms and suicidality suggest that the period following the diagnosis of cancer is the one at higher risk for suicide. Strategies aiming to treat excitatory symptoms in such period might help reduce risk of suicide in oncology patients.

Disclosure of Interest: None Declared

EPP0479

Body image and sexuality in a sample of 112 of moroccan women with breast cancer

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Introduction: According to the WHO, breast cancer is the number one cancer in women worldwide, and its treatment can have serious effects on the bodies of young women. Surgical treatment can be disfiguring, and chemotherapy can cause an early and abrupt menopause. Each of these treatments can also affect a patient's sexuality in the short or long term.
Objectives: The aim of our study is to evaluate sexuality and body perception in women with breast cancer after treatment.
Methods: A quantitative descriptive study was carried out among 112 patients followed for breast cancer,majority in sexual activity, met at the consultation of gynecology of the hospital IBN ROCHD Casablanca, Morocco.The data collection was carried out by an information sheet and with the help of two validated scales: BIS (Body image scale) and FSFI (Female sexual function index) in order to evaluate body image and sexuality as well as the HADS (Hospital Anxiety and Depression Scale)
Results: In our sample, 30.6% were older than 50 years, 40.2% were married, 52.2% of the patients came from urban areas, 20.7% of the patients were illiterate, 22.2%had given up their work due to the disease. In terms of family support, 49.4% of the patients were accompanied to the hospital, 52.8% received financial support and 43.8% received moral support.Regarding the relationship of the couple, there is an increase in the frequency of disputes in 49.5%of cases, a change in behavior in 44.9%. The sexual relationship was marked by a decrease in frequency in 36.7%. Concerning the type of treatment received by the 46.8% of the patients had a mastectomy, 20.9% had chemotherapy, 65.5% had radiotherapy and 45.5% had hormone therapy.The prevalence of depression was 54.1%. Its mean score on the HAD scale was 11.46±3.95; that of anxiety was 52.3% with a mean HAD of 11.41±4.04. The prevalence of sexual dysfunction was 100%with a mean FSFI of 14.26±3.68. Body image disturbance was noted in was noted in 83.8% of cases.The factors associated with a body image disorder in the univariate study were marital status (p =0.035; OR = 0.245), educational level (p =0.029; OR = 0.245), depression (p = 0.019; OR = 3.76), and anxiety (p = 0.029;OR = 3.44).
Multivariate analysis of predictors of body image disorder in women with breast cancer

	Beta	OR ajusté	[IC à 95%]	P-value
education level	2,229	9,28	[1,89 - 45,60]	0,006
Marital status	2,268	9,66	[1,88 – 49,51]	0,007
Anxiety	-1,838	0,159	[0,04 – 0,637]	0,009
Decreased in the quality of sexual relations	1,368	3,92	[1,08 – 14,17]	0,037
FSFI scale	-0,237	0,78	[0,657 – 0,948]	0,011

Conclusions: In total, 4 factors were significantly associated. Given the importance of the subject and the harmful psychological impact on patients further rechearch is needed, also an adequate, emphasized training on the management of women with cancer and their sexual problems and a multidisciplinary work will help improve the psychological state of the women

Disclosure of Interest: None Declared

EPP0480

Case presentation: Very early combined first-line immunotherapy and surgery in tumor-associated anti N-methyl-d-aspartate (NMDA) receptor encephalitis associated with improved outcome

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Introduction: Anti N-methyl-d-aspartate receptor (anti-NMDA-R) encephalitis is a potentially reversible cause of psychosis. Nearly all patients (>95.5%) quickly develop additional neurological symptoms, and only about 50 percent fully recover, often with latency. At symptom onset, patients commonly present with isolated psychosis, making it challenging to distinguish the disease from a primary

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