significant effect only for sexual abuse. Post-hoc comparisons indicated that individuals convicted of sexual offenses reported significantly higher levels of sexual abuse compared to individuals convicted of drug-related offenses. No significant differences were observed regarding institutional placement. A significant effect of prior convictions was found for physical abuse and physical neglect, with higher scores observed in participants with a history of prior convictions. Additionally, small negative correlations were observed between age at onset of delinquent behavior and both physical abuse and physical neglect.
Conclusions: The high prevalence of adverse childhood experiences among male offenders highlights the critical role of early trauma in pathways to criminal behavior. Differences across offense types and links with criminal history suggest that specific forms of adversity may influence offending patterns and recidivism. Limitations include the cross-sectional design and reliance on self-report measures, which may be subject to recall or reporting bias. Future research should explore longitudinal effects and intervention outcomes.

Disclosure of Interest: None Declared

EPP514

Perceptions of committed offenses among forensic psychiatric patients: Retrospective cross-sectional observational study

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Introduction: Forensic psychiatry is an interdisciplinary field that combines psychiatry, medicine, and law. It treats patients with severe mental disorders who have committed criminal offenses and integrates therapeutic care with legal responsibilities. Understanding how these patients perceive their crimes is essential for effective treatment, risk management, and rehabilitation.
Objectives: The aim of this study was to analyze how forensic psychiatric patients currently perceive their committed crimes, and to investigate how these attitudes are associated with the type of offense, psychiatric diagnosis, treatment history, and duration of hospitalization.
Methods: The study included all forensic psychiatric inpatients at the Department of Forensic Psychiatry "Dr. Vlado Jukić", Psychiatric Hospital Vrapče, Zagreb. Data on sociodemographics, diagnoses, treatment history, and criminal code articles were collected, with focus on patients' most recent statements about their crimes: *acknowledges crime as part of illness*, *acknowledges crime but does not think it was due to the illness*, *amnesia*, and *denial.* Statistical analyses included descriptive summaries, cross-tabulations, Fisher's exact tests, and non-parametric tests for group comparisons.
Results: The study included 71 forensic psychiatric patients (59 men, 12 women). Most were diagnosed with schizophrenia spectrum disorders (84.5%) while smaller groups had organic, affective, substance use, or other diagnoses. Regarding attitudes toward their crimes, 40.8% acknowledged without linking to illness, 32.4% denied, 19.7% acknowledged as illness-related, and 7.0% reported amnesia. Violent offenses dominated, with threats (33.8%) and homicide (22.5%) accounting for over half of cases. A significant association was found between crime type and crime attitude (p=0.0048): homicide was more often seen as illness-related, while threats were acknowledged without illness. No significant link was found between diagnosis and attitude. There was no significant association between diagnosis and attitude (p=0.410), although descriptively, patients with organic disorders acknowledged the crime without linking it to illness, while patients with schizophrenia spectrum disorders expressed all four attitudes.
Conclusions: This study shows that forensic psychiatric patients differ in how they perceive their crimes. Some acknowledge the offense as part of their illness while others admit it without linking it to illness, deny it altogether, or report amnesia. These attitudes were significantly associated with the type of offense, which suggests that patients' subjective views could be shaped by the nature of the crime itself. Understanding these perspectives is important for clinical management, risk assessment, and rehabilitation planning in forensic psychiatry.

Disclosure of Interest: None Declared

COVID-19 and Related Topics

EPP515

Exploring PTSD in the General Population During the COVID-19 Pandemic: An Overview of Assessment Approaches and Global Prevalence Patterns

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Introduction: The COVID-19 pandemic profoundly affected mental health worldwide. Post-traumatic stress disorder (PTSD) has been widely studied, but variability in assessment tools and cross-cultural differences remain insufficiently explored.
Objectives: we aimed at: 1) comparing psychometric tools used to assess PTSD in adults during the pandemic; 2) investigating prevalence rates of PTSD in the general adult population during the pandemic, with a specific focus on cross-national differences; 3) identifying predictors and protective psychosocial factors for PTSD during the pandemic.
Methods: A systematic search of PubMed, Scopus, and Web of Science was performed up to November 2024. Observational studies assessing PTSD in the adult general population during the COVID-19 pandemic were included. Extracted data covered prevalence, diagnostic instruments, predictors, and protective factors.
Results: Forty-one studies from multiple regions were analyzed. Prevalence estimates varied widely, with the Impact of Event Scale-Revised yielding the highest rates and the Posttraumatic Stress Disorder Checklist the lowest. Mediterranean and Middle Eastern countries reported higher prevalence compared to Northern Europe. Risk factors consistently associated with PTSD included female sex, younger age, and social isolation. Protective factors, though less consistently reported, included older age as the most frequent finding, alongside perceived social support, health literacy, and—

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