Results:

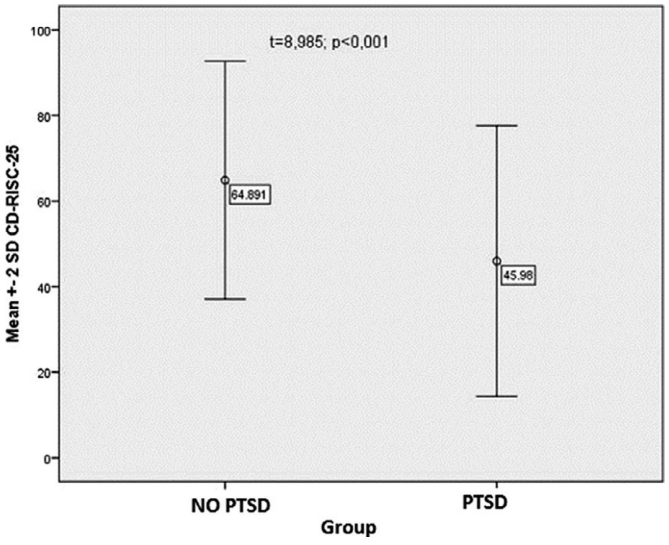


Image:

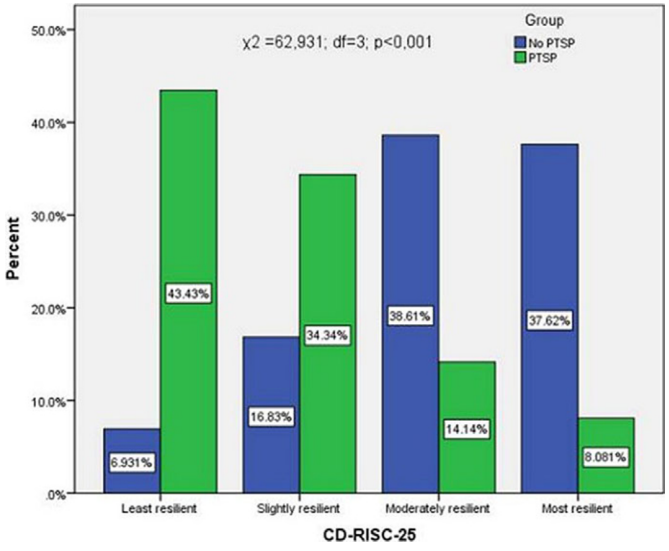


Image 2:

Conclusions: The level of resilience had an impact on the onset, development and outcome of PTSD.
People without PTSD show a statistically higher level of resilience compared to respondents with PTSD.
Respondents without PTSD are statistically significantly more represented in the groups with moderately high resilience, while those with PTSD are the most in the group with the least resilience.

Disclosure of Interest: None Declared

EPV1409

Post-Traumatic Stress Disorder Following a Suicide Attempt

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Introduction: Post-traumatic stress disorder (PTSD) is an anxiety disorder that develops when a person is exposed to death, perceives a threat to their safety, or witnesses a traumatic event, either personally or vicariously. It is a condition that affects over 70% of adults who have experienced trauma at least once in their lives. What happens in the case of individuals who have attempted suicide? Do they also frequently develop PTSD?
Objectives: To determine if individuals who have attempted suicide are at risk of developing PTSD as a result of their suicide attempt. If such a connection is proven, what therapeutic measures could be proposed to prevent the onset of this disorder?
Methods: This is a descriptive study using a survey of patients at the Department of Psychiatry D at RAZI Hospital, who have made one or more suicide attempts during the year 2023.
Results: 20 patients (80%) exhibited a moderate to severe depressive episode at the time of their suicide attempt. The average number of suicide attempts was 1.53. The methods used for the suicide attempts included medication ingestion, observed in 15 patients (60%), phlebotomy in 4 (16%), jumping from a height in 2 (8%), hanging in 2 (8%), and ingestion of toxins in 2 (8%). 14 patients (56%) required hospitalization in a medical unit following the suicide attempt. 9 out of 25 patients (36%) developed PTSD according to DSM-5 criteria.
Conclusions: A significant proportion of suicide attempt survivors may develop PTSD related to the suicide attempt. PTSD related to a suicide attempt could serve as a viable target for assessment and intervention to improve quality of life and reduce the risk of future suicide among individuals who have attempted suicide. However, more studies are needed to evaluate the risk of PTSD in this population.

Disclosure of Interest: None Declared

EPV1410

Erectile Dysfunction in Veterans with Post-Traumatic Stress Disorder

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Introduction: The mental health burden of post-traumatic stress disorder (PTSD) is significant for all those affected, with a higher incidence among veterans due to military trauma and the particular strains of military duty. It results in detrimental effects on life quality and functional impairment in various domains, including sexual dysfunction (SD).
One of the most prevalent yet underreported sexual dysfunction in Tunisian veterans is erectile dysfunction (ED).

Objectives: The aim of the current study was to assess the prevalence of ED and its severity among Tunisian veterans with PTSD versus those without it.
Methods: A cross-sectional descriptive and analytical survey was conducted between September and November 2024 on Tunisian veterans seeking consult, using a data file and 2 self-report questionnaires :
The PTSD Checklist for DSM-5 (PCL-5) to assess current PTSD symptoms with a cut-off score of 33 or higher to detect PTSD cases.
The IIEF-5 (International Index of Erectile Function 5) to evaluate ED with six categories: [1-4]: uninterpretable, [5-7]: severe, [8-11]: moderate, [12-16]: mild to moderate, [17-21]: mild and [22-25]: no ED.
To analyze the obtained data, IBM SPSS was used.
Results: Fourty veterans were enrolled in this study with an average age of 38.5 [24-61] years. The majority (67.5%) were married, followed by 25% single individuals, 5% divorced and 2.5% in a relationship. Most of the participants (77.5%) were smokers and 25% reported alcohol consumption, with 20% of them being regular drinkers and 80% consuming alcohol occasionally. None reported using cannabis or other illicit drugs. Regarding medical history, 32.5% had health issues with the most common being varicocele, diabetes, arterial hypertension and myocardial infarction.
Among the veterans, 50% had PTSD. Ninety-five percent had received psychiatric follow-up, and 78.9% were on antidepressants.
In the control group with no PTSD (50%), 85% had a psychiatric follow-up, with 76.5% taking antidepressants.
In patients with PTSD, 75% reported ED, while 15% had no SD and 10% had an uninterpretable score. ED was mild to moderate in 46.7%, mild in 33.3% and moderate in 20%. No severe cases of ED were observed in this group.
In contrast, in patients with no PTSD, ED was only reported in 60% of cases and was even severe in 33.3% of patients.
No significant correlation was found between ED and PTSD (p= 0.3).
The prevalence of ED in the overall sample was 67.5% with only 11.1% of them using sexual enhancers.
Conclusions: This study suggests that while PTSD may exacerbate ED in some individuals, other factors such as comorbid psychiatric or medical condition and the use of a variety of medications may play a more significant role in the underlying cause. Given its significant impact on quality of life, early screening and treatment are essential.
Additionally, further research is needed to understand the underlying causes of ED and to develop more targeted interventions.

Disclosure of Interest: None Declared

EPV1411

Comorbid Anxiety, Depression and PTSD in Tunisian Military Veterans

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Introduction: Intrusion, hyperarousal, avoiding triggers and alterations in cognition and mood are the symptoms defining a post-traumatic stress disorder (PTSD).
While PTSD can occur in individuals from all walks of life, its prevalence and severity are higher among military veterans, exacerbating the impact of other mental health disorders such as anxiety and depression and impairing quality of life.
Objectives: The current study sought to determine the prevalence of comorbid anxiety and depression with PTSD among Tunisian military veterans.
Methods: A cross-sectional descriptive and analytical survey was conducted between September and November 2024, focusing on Tunisian veterans seeking consult, using a data file and 2 self-report scales :
The PTSD Checklist for DSM-5 (PCL-5) to assess current PTSD symptoms with a cut-off score of 33 or higher to detect PTSD cases.
The Hospital Anxiety and Depression (HAD) scale, which consists of two subscales: the Anxiety (A) subscale and the Depression (D) subscale. For both subscales, scores are ranging from 0 to 21: [0-7]: normal, [8-10]: borderline case, [11-21]: an abnormal level of anxiety or depression.
To analyze the obtained data, IBM SPSS was used.
Results: The study enrolled 24 veterans diagnosed with PTSD, with the majority being male (87.5%). Mean age of the participants was 34 [23-50] years. Most (58.3%) were married, 33.3% were single, 4.2% were divorced, and 4.2% were in a relationship.
A significant proportion of the surveyed (79.2%) were smokers, while 29.2% reported occasional alcohol consumption. None reported using illicit drugs, such as cannabis.
Regarding medical history, 29.2% had medical health conditions including asthma, diabetes, hypertension, herniated disc, and kidney stones.
In terms of psychiatric care, 95.8% were under regular psychiatric follow-up and 54.2% reported having a support system.
Regarding psychiatric comorbidities, 95.8% (N=23) of participants presented with anxiety symptoms with 4.2% falling into the borderline category. For depression, 66.7% reported depressive symptoms, 25% were classified as borderline cases and 8.3% showed no depressive symptoms.
Median PCL-5 score was 55.5±12.15. Half of the population (N=12) had a score higher than 55. All of them exhibited depressive symptoms. In contrast, among those with lower scores, only 33.3% had depressive symptoms, 50% had borderline cases and 16.7% had no depressive symptoms.
A significant correlation was found between **PCL-5** scores above 55 and the presence of depressive symptoms (p=0.02), suggesting a strong association between higher PTSD severity and depression in this sample.
Conclusions: This study reveals a high prevalence of comorbid anxiety and depression among Tunisian Military veterans suffering from PTSD with a significant association between higher PTSD severity and depressive symptoms, highlighting the need for integrated mental health care that addresses both PTSD and its comorbidities.

Disclosure of Interest: None Declared

EPV1412

Fight or Flight Freeze- A Case Report Paper, PTSD patient

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