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the combined influence of endless multi-stress factors was revealed; The researchers were faced with an effective treatment - the search for ways of rehabilitation in the current multi-stress conditions. Furthermore studies have to be addressed to create new complex recovery strategies in modern multi – face unsolved stress situations.

Disclosure of Interest: None Declared

EPV1423

Professional future of military personnel suffering from post-traumatic stress disorder

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Introduction: Post-traumatic stress disorder (PTSD) is a disabling condition that develops after exposure to a traumatic event. Military personnel are particularly affected by this psychiatric condition, which profoundly alters their personal, social and professional lives. Professional redeployment is most often the decision taken to keep these military personnel in the army.

Objectives: To identify the professional future of military personnel suffering from PTSD

Methods: Retrospective descriptive study conducted at the Military Centre for Occupational Medicine and Occupational Safety between 2017 and 2022 among active military personnel requesting occupational redeployment.

Results: We collected 22 cases of professional redeployment for PTSD, representing 24% of all requests for redeployment. Our study population was exclusively male, with a mean age of 30 ±9 years, mainly from the army (19 cases), divided into officers (3 cases), non-commissioned officers (12 cases) and enlisted men (7 cases). The traumatic event responsible for the PTSD was a mine explosion (8 cases), a road accident (6 cases), a gunshot wound (6 cases), a fall from a parachute (1 case) and an air accident (1 case). All patients had previously been exempted from certain military duties, mainly carrying weapons (22 cases), guards duty (5 cases) and driving vehicles (5 cases). When the decision to reclassify was taken, the military personnel was affected to a mainly administrative post (19 cases), a gardening post (1 case), a plumbing post (1 case) and a catering post (1 case).

Conclusions: This study highlights the fact that PTSD in the military represents a serious and complex challenge that requires special attention. It is imperative to put in place preventive measures and provide appropriate management of PTSD. That can support the military personnel affected and maintain the operational capability of the troops.

Disclosure of Interest: None Declared

EPV1425

Dissociative Identity Disorder in Patients Under Stress

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Introduction: Dissociative Identity Disorder (DID), as defined in the DSM-5-TR, involves two or more distinct personality states within an individual, along with memory gaps for daily or traumatic events [1]. It is strongly associated with early trauma, such as childhood abuse, and linked to severe psychiatric comorbidities, including depression, anxiety, and self-harm, with an elevated risk of suicide attempts [2][3]. Stress-related neurobiological responses, particularly HPA axis hyperactivity, contribute to identity fragmentation in DID patients. Treatment, often through cognitive-behavioral therapy, aims to integrate dissociated states, reduce self-destructive behaviors, and improve quality of life [2][3].

Objectives: In this case study, we present two compelling cases of dissociative identity disorder following a state of stress. We hope this case study will help reveal the possible association of the disorder with stress

Methods: This is a retrospective and descriptive case study aimed at exploring the manifestations and associated factors of dissociative identity disorder in patients who have experienced traumatic events.

Results: Clinical Case Summary of Case 1 :

A 24-year-old student developed dissociative identity disorder after witnessing a fatal accident caused by a drunk driver. This trauma fragmented his personality into three identities: a child expressing needs through crying, a rebellious adolescent who smokes, and a feminine, seductive personality. These identities appear involuntarily, especially during periods of stress, causing him anxiety and memory loss regarding these episodes.

Clinical Case Summary of Case 2 :

A 23-year-old single, unemployed patient with a long psychiatric history was admitted following a suicide attempt by jumping. She experiences recurrent depressive episodes, suicidal thoughts, and engages in self-harm to manage her anxiety. Salma has dissociative identity disorder, with an alternate identity named “RUBY” that emerges under stress, driving her towards self-destructive behaviors and exacerbating her distress. Her history includes significant childhood trauma, such as sexual abuse and physical violence, contributing to her identity dissociation. She also exhibits alcohol abuse, consuming up to 1 liter daily to manage her anxiety.

Conclusions: Dissociative identity disorder is a complex condition, often linked to early trauma, characterized by the presence of multiple distinct identities within the same individual. This disorder causes significant distress and impacts patients’ daily functioning, especially in stressful situations. Treatment primarily involves therapeutic approaches aimed at integrating the different identities and reducing self-destructive behaviors. Understanding and managing this disorder require a personalized approach and long-term follow-up.

Disclosure of Interest: None Declared

EPV1426

A system of personality-oriented treatment of stress-related disorders in war-affected adults

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Introduction: War is the most powerful psychosocial stressor affecting all segments of modern Ukrainian society.

Objectives: It was conducted a comprehensive examination of 176 patients of both sexes: Group I consisted of 101 military personnel; Group II - 97 volunteers; Group III - 95 IDPs in order to develop a system of personality-oriented treatment of stress-related disorders in persons affected by war.

Methods: Clinical and psychopathological examination, which included a structured interview and patient's observation aimed at studying influence of socio-psychological and biological factors on development of post-stress disorders. Psychodiagnostic method include use: M-PTSD; HADS; HAM-A, HAM-D; Questionnaire of neuropsychological stress by T.A. Nemchin; State-Trait Anxiety Inventory; Methods of diagnosing coping behaviour in stressful situations; Impact of Event Scale-Revised; Clinical Administered PTSD Scale-CAPS; Traumatic Stress Questionnaire; Colombian Suicide Intentions Severity Scale; Methods for determining suicide risk and assessing self-awareness of death in patients with depressive disorder (Kozhyna H.M., Zelenska K.O., 2015); Methods for 'Diagnosing the level of social frustration (Wasserman L.I., modified by Boyko V.V., 2002).

Results: Clinical structure of stress-related disorders was presented by PTSD and adjustment disorders. Clinical structure of PTSD was represented by anxious, dysphoric, asthenic and somatoform syndromes. System of personality-oriented treatment was developed, including differentiated use of psychopharmacotherapy, psychotherapy and psychoeducation; creation of re-adaptive atmosphere; formation of health-centered lifestyle and based on a salutogenic approach. Pharmacotherapeutic component of developed program included differentiated, targeted use of SSRIs, SNRIs, antipsychotics, tranquilizers and anxiolytics. Psychotherapeutic program was based on identification of dominant resource channels for overcoming stress and finding inner stability using integrative model of psychological survival after severe stress, Basic Ph. Psychotherapeutic support included trauma-focused CBT for all patients, EMDR therapy with additional use of Pucelik Consulting Group's PTSD Self-Management Program for servicemen patients in Group I; individual crisis therapy for patients in Group II; and interpersonal therapy for patients in Group III. For anxious depressive reactions, CBT and art therapy were used for all patients; with the additional use of problem-solving therapy for patients of Group I; Group II - individual crisis therapy; Group III - mindfulness techniques, relaxation training.

Conclusions: Effectiveness of developed system of personality-oriented treatment of stress-related disorders was proved, and positive dynamics of mental state, reduction of psychopathological symptoms, increased resistance, reduced levels of social and psychological frustration were established.

Disclosure of Interest: None Declared

EPV1429

The Effects of Deliberate Rumination and Prolonged Grief on Approach-Avoidance Behavior

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Introduction: In the Cognitive-Behavioral Conceptualization of Complicated Grief, avoidance strategies toward bereavement-related stimuli contribute to the development and maintenance of prolonged grief. Traumatic events, such as bereavement, often lead to intrusive negative thoughts and evoke painful emotions. For individuals experiencing prolonged grief, avoidant coping can deteriorate their symptoms. Deliberate rumination on the loss, as an active information-processing strategy to understand and find meaning in the traumatic experience, may promote adaptation to life after the loss.

Objectives: This study aims to examine the impact of prolonged grief on approach-avoidance behaviors and to evaluate the effects of a deliberate rumination intervention.

Methods: Data were collected from 41 Korean adults aged 18 and above, who had experienced bereavement at least 12 months prior. Participants were randomly assigned to either a deliberate rumination intervention group (n=21) or a distraction intervention group (n=20). The Approach-Avoidance Task (AAT) was used to measure implicit approach-avoidance behaviors toward bereavement-related and neutral stimuli in each group, with assessments conducted both before and after the intervention.

Results: The study results revealed no significant differences in approach-avoidance tendencies according to the level of prolonged grief for both bereavement-related and neutral stimuli. However, a significant interaction effect between group and time of measurement was observed for bereavement-related stimuli [$F(1,39)=4.431$, $p<.05$], but not for neutral stimuli [$F(1,39)=.424$, $n.s.$].

Conclusions: Although this study did not identify significant avoidance tendencies according to prolonged grief levels, it experimentally showed that deliberate rumination influences avoidance strategies among individuals experiencing prolonged grief. This finding implies significance in suggesting effective intervention approaches for those with pathological grief.

Disclosure of Interest: None Declared

EPV1431

Post-Traumatic Stress Disorder and Cognitive Impairment: The Great Unknown

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Introduction: Accumulating evidence identifies post-traumatic stress disorder (PTSD) as a significant risk factor for the development of dementia, with affected individuals demonstrating a two-fold increase in dementia risk compared to the general population.