Introduction: The Irish traveller community are an ethnic minority group known for their distinct identity. Although this group has its roots in Ireland, they are marginalised and discriminated against by every part of Irish society. Adolescent females encounter particular difficulties within the expectations of this community. They encounter specific issues including mental illness, sexual stigma and limitations to the role of women.

Objectives: Explore the vulnerabilities of young women within the Irish travelling community.

Methods: Literature review and case series using three cases.

Results: Patient A is a nineteen-year-old girl known with a history of overdose and depression. Significant triggers for her mental illness are linked to familial disharmony and sexual assault. Patient B is seventeen years old and was referred for CAMHS inpatient admission following overdose. She has a background of sexual assault and drug misuse. Patient C is fifteen years old and was admitted to a CAMHS unit following a hanging attempt. Her suicide attempt was triggered by chronic bullying, grief and sexual assault.

Conclusions: Young women in the travelling community are estimated to be twice as likely to suffer mental health issues as compared to men. They are primed to follow a culture where the main events in life are centred around training for marriage and child rearing. In this world of ethical practice and focus on women’s rights, females in such communities can feel conflicted between their identity, heritage and their position in the world. Adolescents within the travelling community should be monitored with consciousness given to their particular risk factors.

Disclosure: No significant relationships.

Keywords: Irish travelling community; mental illness within the travelling community; women within the Irish travelling community.

EPP0648

Antidepressant treatment in premenstrual dysphoric disorder, case report

M. Garcia Moreno1*, A. De Cos Milàs2, L. Beatobe Carreño2, M.B. Poza Cano3, A. Izquierdo De La Puente1 and P. Del Sol Calderón4

1HOSPITAL UNIVERSITARIO PUERTA DE HIERRO MAJADAHONDA, Psychiatry, MADRID, Spain; 2HOSPITAL UNIVERSITARIO DE MÓSTOLES, Psychiatry, MADRID, Spain; 3HOSPITAL UNIVERSITARIO EL ESCORIAL, Psychiatry, MADRID, Spain; and 4Hospital Universitario Puerta de Hierro, Psiquiatría Infantil-Juvenil, Madrid, Spain

*Corresponding author.
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Introduction: Premenstrual dysphoric disorder (PMDD) is included for the first time in the last edition of DSM within affective disorders. It is necessary that 5 of a list of 11 symptoms (lability, irritability, depressed mood, anxiety, lethargy, being out of control or physical symptoms among others) appear in the majority of menstrual cycles but must be only present during the week before menstruation improving after its onset. It has a prevalence of 1.8-5.8% and it is associated to significant functional impairment. SSRIs are indicated as first-line treatment in severe symptoms.

Objectives: To review about premenstrual dysphoric disorder and its psychopharmacological treatment.

Methods: We chose two middle schools and one college from Changsha (a city in China) at random with a total of 2047 students. Among them, 1661 students gave us certain gender identity. Professional psychiatrists then used ICD-11 and DSM-5 criteria to confirm whether the self-reported gender minorities could be diagnosed with GI/GD via phone or in person.

Results: In total, 7.5% of the college students and 5.8% of the middle school students reported themselves as gender minorities. Although 29% of college students and 43.8% of middle school students did not cooperate with the subsequent psychiatric interviews, none of the self-reported gender minority students meet the GI/GD criteria of ICD-11/DSM-5.

Conclusions: The epidemiological investigation of transgender is heavily affected by the definition and the data sources. There is a huge heterogeneity between self-reported transgender and diagnosed GI/GD. Future transgender studies should strictly control inclusion criteria.

Disclosure: No significant relationships.

Keywords: Gender Incongruence; Gender Dysphoria; Transgender

EPP0647

The gap between self-reported and medically confirmed Gender Incongruence/Gender Dysphoria among students in China

Y. He1, Y. Pan2* and X. Chen1

1The Second Xiangya Hospital of Central South University, Department Of Psychiatry, Changsha, China and 2University of Bath, Department Of Psychology, Bath, United Kingdom

*Corresponding author.
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Introduction: As the incidence of gender incongruence (GI)/gender dysphoria (GD) rises yearly, public understanding of transgender is also increasing, whereas this improvement cannot be achieved without extensive transgender-related surveys. However, most of the surveys were only issued to people who identify themselves as transgender with the absence of medical confirmations in most situations. These result in a gap between transgender survey and diagnosed GI/GD.

Objectives: This study aims to discover the gap between self-reported and diagnostically confirmed transgender and GI/GD individuals among students in China.

Methods: We chose two middle schools and one college from Changsha (a city in China) at random with a total of 2047 students. Among them, 1661 students gave us certain gender identity. Professional psychiatrists then used ICD-11 and DSM-5 criteria to confirm whether the self-reported gender minorities could be diagnosed with GI/GD via phone or in person.

Results: In total, 7.5% of the college students and 5.8% of the middle school students reported themselves as gender minorities. Although 29% of college students and 43.8% of middle school students did not cooperate with the subsequent psychiatric interviews, none of the self-reported gender minority students meet the GI/GD criteria of ICD-11/DSM-5.

Conclusions: The epidemiological investigation of transgender is heavily affected by the definition and the data sources. There is a huge heterogeneity between self-reported transgender and diagnosed GI/GD. Future transgender studies should strictly control inclusion criteria.

Disclosure: No significant relationships.

Keywords: Gender Incongruence; Gender Dysphoria; Transgender
and vociferous attitude with verbal aggressiveness only the week before menstruation during several years. These symptoms interfered negatively in her relationships. We started sertraline treatment with ad integrum clinical recovery after two menstrual cycles. 6 months later we indicated to take sertraline only the week before menstruation, maintaining stability.

Conclusions: 1) It is important to consider premenstrual dysphoric disorder as a possible diagnosis in women with premenstrual discomfort symptoms. 2) It might be consider as a depressive disorder. 3) Antidepressant treatment should be considered in women with disabling symptoms.

Disclosure: No significant relationships.

Keywords: depressive disorder; premenstrual; women; Treatment

EPP0650
Perfectionism and stereotype in plastic surgery
L. Hogea1*, L. Corsaro2 and T. Anghel1
1"Victor Babes” University of Medicine and Pharmacy, Department Of Neurosciences, Timisoara, Romania and 2Campus Bio Medico, Plastic Surgery, Roma, Italy
*Corresponding author.
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Introduction: The concept of beauty has transformed through time and across the globe during specific events in history and continues to evolve.

Objectives: This study will focus on how tendency toward perfectionism and stereotypes promoted by media influence beauty perception and the need of plastic surgery.

Methods: In this study we examined factors influencing attitudes toward plastic surgery among 23 women with an average 35 years old and the data were collected through three questionnaire: The abbreviated multidimensional perfectionism scale (MPS) is a 30-item measure separated into two 15-item subscales: self-oriented perfectionism and socially prescribed perfectionism; The abbreviated perfectionistic self-presentation scale (PSPS) is a 20-item measure divided into two ten-item subscales: perfectionistic self-promotion and non-display of imperfection. Participants’ perceptions of media messages about appearance issues have been assessed using 30 items of the Sociocultural Attitudes toward Appearance Questionnaire-3 (SATAQ-3). Sociocultural attitudes toward appearance, physical appearance perfectionism were considered as predictors of tendency toward plastic surgery.

Results: The results showed that there is significant positive association between perfectionism, the influence of mass media and increased women’s likelihood of undergoing plastic surgery.

Conclusions: Our findings suggest firstly that a greater perfectionist tendency and psychological investment in physical appearance predict more favorable attitudes toward plastic surgery. Perfectionists women may choose plastic surgery as part of their need of bodily perfection. Secondly, the choice of plastic surgery depended on sociocultural attitudes toward physical appearance.

Disclosure: No significant relationships.

Keywords: attitude; beauty; stereotyping; cosmetic surgery; perfectionism

EPP0653
Mother–Baby Day Hospital (MBDH): preliminary results of effectiveness of multidisciplinary intensive intervention for women with postpartum affective/ anxiety disorder.
E. Gelabert1*, A. Torres Giménez2, S. Andrés–Perpiñá2, C. Naranjo2, E. Roda1, L. García–Esteve1 and A. Roca Lecumberri2
1Universitat Autònoma de Barcelona, Psicologia Clínica I De La Salut, Bellaterra (Barcelona), Spain and 2Hospital Clinic de Barcelona, Servei De Psiquiatria I Psicologia. Unitat De Salut Mental Perinatal, Barcelona, Spain
*Corresponding author.
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Introduction: Women experiencing postpartum mental illness have unique needs. Psychiatric Mother Baby Units (MBUs) can provide specialist in-patient care for mothers without separation from their baby. Since 2018, an innovative Mother-Baby Day Hospital (MBDH) have been developed and implemented in a public hospital in Spain, directed at the intensive, integral, and multidisciplinary treatment.

Objectives: The aim of the present study was to obtain preliminary data regarding its effectiveness in postpartum women with affective and anxiety disorders.

Methods: Thirty-three mothers and their babies with affective or anxiety disorders attended to MBDH CLINIC-BCN participated in the study. All women were assessed at admission, discharge, and 3 months follow-up. Primary outcomes were depression (EPDS) and anxiety symptoms (STAI-S), mother-infant bonding (PBQ) and functional impairment (HNoIS).

Results: At discharge, 100% of women no longer met the full criteria for the main diagnosis (PSR≥5). Significant improvements from admission to discharge were achieved in depression and anxiety symptoms, mother infant bonding and functional impairment. Clinical significance was also calculated. After treatment, mothers had greater autonomy for care their babies. Similar results were observed at 3 months follow-up. The MBDH was rated by mothers as an excellent quality program and they would recommend it.

Conclusions: This study found that multidisciplinary intervention at MBDH for postpartum women with affective or anxiety disorders is effective, not only for maternal psychopathology but also for maternal care and bonding. It is imperative to develop specialized devices that integrate the care of the dyad by professionals specialized in perinatal mental health.

Disclosure: No significant relationships.

Keywords: Mother–Baby Day Hospital; Perinatal anxiety disorders; Perinatal mood disorders; Perinatal interventions

EPP0654
Unplanned Pregnancy in women with mental disorder
A. Roca Lecumberri1*, E. Gelabert1, A. Torres Giménez1, E. Solé1, S. Andrés–Perpiñá1, E. Roda1, C. Lopez1, C. Naranjo1 and L. Garcia–Esteve1
1Perinatal Mental Health Unit. Hospital Clínic de Barcelona, Institut Clínic De Neurociències, Barcelona, Spain and 2Universitat Autonoma