**EPV0733**

**You Look Good Enough to Eat: A Brief Exploration of Human Cannibalism and Mental Illness**

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**Introduction:** Although evidence of cannibalism in humans dates back millennia, for most civilized societies, it is an unthinkable act of violence and strictly taboo. It is commonly relegated to the domain of terror films and literature, often associated with the likes of Jeffrey Dahmer or Hannibal Lecter. However, for some, this theme encompasses a pathological or sexual realm. Vorarephilia or sexual cannibalism is, at its simplest level, a psychosexual disorder characterized by the erotic desire to be consumed by, or to personally consume, another human being’s flesh.

**Objectives:** The authors aim to review human sexual cannibalism as a concept and its eventual relationship to mental illness with recourse to the description of cases of human cannibalism documented in the literature.

**Methods:** A brief non-systematized literature review utilizing various databases including PubMed and Google Scholar, as well as complimentary literature and case reports when pertinent to the theme was performed.

**Results:** Although cannibalism is a common phenomenon in the animal kingdom, its expression in humans is assumed to be a minority occurrence and relegated to stories of a more primal past. Pathological cannibalism is an extremely rare occurrence and has been described in association with severe psychotic mental illness and extreme forms of significant paraphilia. Sexual cannibalism appears as a rarity in humans and although the majority with this paraphilia do not partake in actual human consumption, remaining a fantasy-based desire, cases of cannibalism have been reported and tried.

**Conclusions:** Eating the flesh of one’s own species is probably one of the few remaining taboos in modern human societies. In humans, cannibalism is a rare occurrence and has been associated with mental illness. Due to the rarity of this phenomenon, with few cases documented in the literature, the underlying etiology, as well as potential environmental and individual risk factors are still to be defined, indicating a potential for further study.

**Disclosure of Interest:** None Declared

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**EPV0732**

**ANXIETY AND DEPRESSION IN TUNISIAN PATIENTS WITH PARKINSON’S DISEASE**

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**Introduction:** Anxiodepressive disorders in Parkinson’s disease (PD) are quite frequent and considered as non-motor signs of the disease. Few studies have studied the link between these entities.

**Objectives:** The objective of this study is to determine the prevalence of anxiety and depression in patients with PD, and factors associated with them.

**Methods:** A descriptive and analytical cross-sectional study collected from patients followed at the neurology consultation of Habib Bourguiba’s university hospital in Sfax, Tunisia. We used:

- a sociodemographic, clinical and therapeutic data sheet
- Hospital Anxiety and Depression Scale (HADS): to study anxiety and depression. A score ≥10 means a certain anxiety or depression

**Results:** We have involved 47 patients. The average age was 61.47 years with a sex ratio (M/W) = 1.47. Amantadine was received by 12.77% of patients, anticholinergics by 14.9% of patients, and 87.24% of patients were treated with Levodopa.

HADS: the average scale of Depression was 8.62 ± 4.54 and the median scale anxiety was 7 [1-18]. Depression and anxiety were present in 38.29% and 27.68% of cases, respectively. Depression was significantly correlated with Amantadine intake (P = 0.036) and Levodopa dose (P = 0.016). Anxiety was significantly associated with anticholinergic intake (P = 0.011). Both depression and anxiety were not statistically correlated to the presence of motor complications of dopa therapy (P = 0.44 and 0.7 respectively).

**Conclusions:** The therapeutic management of patients with PD influences the occurrence of anxiety and depression, which proves the importance of early detection of these disorders to ensure better support.

**Disclosure of Interest:** None Declared

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**EPV0733**

**Impact of medical TV shows on the surgical knowledge of non-healthcare students of Lahore, Pakistan**

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**Introduction:** A popular genre of television shows is medical dramas. Although the primary objective of watching these shows is entertainment, acquiring medical knowledge is a passive by-product. Surgical procedures constitute a large part of the storyline of these shows. This could either serve as a source of medical knowledge or provide false information, the effect being especially important in individuals with no prior medical exposure.

**Objectives:** This study aims to assess the impact medical TV shows can have on the surgical knowledge of non-healthcare students and the difference in knowledge between different demographic groups (among those with relatives in the medical community and those without).

**Methods:** A cross-sectional study was conducted among the non-healthcare students of Lahore, Pakistan. A self-administered questionnaire was used containing socio-demographic factors (age, gender, educational discipline), history, and hours of medical TV.
shows watched. It also contained ten questions each with a score of 1 to assess surgical knowledge. Data was analyzed using SPSS v.26.

**Results:** Among the 1097 respondents, 450 (41%) had a history of watching medical TV shows. The majority, 319 (29.1%), had seen these shows for < 24 hours. The mean score of all respondents was 5.79 out of a maximum score of 10. Respondents with a history of watching medical TV shows were more knowledgeable than those who did not (p < 0.001). Similarly, respondents with a history of watching more hours of medical TV shows were more knowledgeable than those who watched for a lesser number of hours (p < 0.001). Respondents with relatives in the healthcare profession were also more knowledgeable than those without (p = 0.049).

**Conclusions:** If properly developed, while maintaining their primary entertainment value, medical TV shows can also be used as efficient learning tools. Quality controls must also be applied to minimize the risk of false information.

**Disclosure of Interest:** None Declared

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**EPV0734**

**Neuropsychological effects of occupational exposure to organic solvents: A study of 37 cases**

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**Introduction:** Occupational exposure to organic solvents can have multiple health effects for exposed employees. Neuropsychic effects represent an important part of these effects and have a significant impact on patients’ ability to work.

**Objectives:**
- To describe the socio-professional and medical characteristics of workers exposed to organic solvents
- To screen among the study population for neuropsychological effects related to an organic psychosyndrome using the Q16 questionnaire.

**Methods:** A retrospective descriptive study of workers exposed to organic solvents, who were referred to the occupational medicine department of Charles Nicolle Hospital in Tunis for a medical assessment of their fitness for work over the period from 2016 to 2022. The socio-professional data were collected from the medical records. The Swedish Q16 questionnaire in its French version was used to screen for neuropsychological signs of organic psychosyndrome.

**Results:** A total of 37 workers were included. The mean age was 45.38 ± 8.63 years with a clear male predominance (77%). The mean occupational seniority was 21.39 ± 11.11 years. The average duration of the occupational exposure to organic solvents was 18.25 ± 11.29 years. The most represented sectors of activity were the plastics industry (11%), the automotive industry (19%), the carpentry sector (14%) and the aeronautics sector (9%). Our population was represented by polyvalent workers in 49% of cases and by painter in 24% of cases. Psychiatric history was noted in only one case. The main functional signs reported by the workers were wheezing dyspnea with breathing difficulties (13%) and headaches (11%).

The Q16 questionnaire was found to be positive in 65% of the cases, with a higher rate of positivity for the items relating to unusual fatigue (73%), irritability for no particular reason (67%), short memory (64%) and headaches (58%). Acquired dyschromatopsia detected by a Lanthony test was found in 39% of the cases, 23% of which was associated with a positive Q16 questionnaire. Additional exploration by specific psychotechnical tests was carried out in five cases, all of which came back positive with significant attentional and cognitive impairment.

A declaration of an occupational disease according to the Table n° 23 (Halogenated derivatives of aliphatic hydrocarbons) and Table n° 40 (other liquid organic solvents for professional use) of the Tunisian list of occupational diseases eligible for compensation was made in three and two cases respectively. A definitive exemption from exposure to organic solvents was indicated for all workers with a positive Q16 questionnaire.

**Conclusions:** Exposure to organic solvents is a risk encountered in various occupational sectors. Thus, education of the employees to the dangers encountered with a reinforcement of the collective and individual technical protection means are essential in order to avoid their detrimental effects on health.

**Disclosure of Interest:** None Declared

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**EPV0735**

**Study of the association of work-related musculoskeletal disorders and anxiety-depressive diseases**

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**Introduction:** Mental disorders, musculoskeletal diseases (MSDs) and their comorbidities are major threats to work and functional ability. The relationship between mental health and the common MSDs has not received enough attention.

**Objectives:** To study the socio-professional characteristics of workers suffering from work related MSD

**Methods:** A descriptive cross-sectional study conducted among workers with work-related MSDs who consulted the occupational medicine department of the Charles Nicolle Hospital between January 2022 and September 2022. A remote survey was conducted among these workers to screen for anxiety and depressive disorders using the Hospital anxiety and Depressive Scale.

**Results:** The study population consisted of 54 workers with MSDs with a sex ratio (M/F) of 0.74. The average age was 44.4 [27-61 years]. The average professional seniority was 14.9 years ± 7 years and the sectors with the highest prevalence of MSDs were the health sector (22%), the food industry (13%) and the textile industry (11%). The workers reported MSDs of the lumbar spine in 61%, gonarthrosis in 31%, followed by MSDs of the upper limb in 25%.