and reward obtained at work leads to experiencing a stressful work environment.

**Methods:** 153 shift working female nurses completed a short questionnaire about work schedule, the Effort-Reward Imbalance questionnaire with the Overcommitment (OC) scale and the Insomnia Severity Index (ISI). To estimate the mediating effect of OC on the association between ERI and ISI, we conducted a mediation analysis using PROCESS v3.4 macro in SPSS.

**Results:** The model including ERI and OC accounted for 12.25% of the variance in ISI scores. ERI significantly predicted OC and OC significantly predicted insomnia. The direct effects of ERI on ISI remained significant after controlling for the effects of overcommitment. 35.07% of the effect of ERI on ISI was through OC.

**Conclusions:** 35.07% of the effect of ERI on ISI was through OC. The model including ERI and OC accounted for 12.25% of the variance in ISI scores. ERI significantly predicted OC and OC significantly predicted insomnia. The direct effects of ERI on ISI remained significant after controlling for the effects of overcommitment. 35.07% of the effect of ERI on ISI was through OC.

**Disclosure:** No significant relationships.

**Keywords:** occupational stress; Insomnia; overcommitment; Shift Work

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**EPV0662**

**Unravelling a couple in conflict: Undiagnosed obstructive sleep apnea**

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**Introduction:** Obstructive sleep apnea impacts quality of sleep and leads to sleep deprivation with consequences on level of general functioning and interpersonal relationships besides the known contribution to cardio and cerebrovascular disorders and sexual dysfunction. Most adults sleep with a partner and sleep disorders may also disrupt the partner’s sleep, yet surprisingly obstructive sleep apnea, even when such is the case, goes frequently undiagnosed.

**Objectives:** To reflect on a clinical case that presents apparently as just another couple in conflict but in fact when unravelled leads to a diagnosis of obstructive sleep apnea that may have significant contribution to the conflict.

**Methods:** Unravelling what was at the core of a couple in conflict.

**Results:** A heterosexual couple in their late thirties present in serious conflict with each other. Both are depressed and anxious, sleeping badly, with intimacy issues and having trouble dealing with work obligations and household chores. After continued squabbling, some self-reflection but mostly other blaming, a thread released by the female partner leads to sleep evaluation of the male partner with a resulting diagnosis of obstructive sleep apnea and subsequent treatment. And the couple relationship got better....

**Conclusions:** Obstructive sleep apnea is frequent in the general population and more often than not undiagnosed but may be even more frequent in patients seeking mental health services. A sleep history is an important part of evaluation of patients who present with anxiety, depressive, sexual function and/or cognitive complaints and relationship issues. Interviewing intimate partners may provide essential clues to the possibility of existing sleep disorders.

**Disclosure:** No significant relationships.

**Keywords:** intimate partners; couple in conflict; obstructive sleep apnea

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**EPV0663**

**A case of incubus phenomenon**

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**Introduction:** The incubus phenomenon is a paroxysmal sleep-related disorder in which patients experience sleep paralysis and compound hallucinations. The symptoms of this phenomenon contain: sensed presence, fear, visual and auditory hallucinations, unusual body experiences such as out-of-body experience and feelings of floating/paralysis, experiencing a pressure on the thorax, difficulties breathing and a feeling of pain(1). This phenomenon appears to be universal, but has different cultural explanations(2).

**Objectives:** We present a case of possible incubus phenomenon to raise awareness about this specific condition.

**Methods:** A literature search in English was performed using PubMed with the following mesh term: ‘incubus phenomenon’.

**Results:** We present a 29-year old man, known with an intellectual disability (IQ=74), psychotic disorder and a cannabis use disorder. After neurological examination, he was diagnosed with narcolepsy and cataplexy. Over the past weeks there had been an increase of hallucinations that appear before, during or after sleep. The patient’s thoughts included sexual approaches by caregivers, difficulties in breathing and a moving sensation while laying down in bed and experiencing pressure on the thorax, assuming a woman was sitting on his chest. Literature search shows a lifetime prevalence of 0.11 % in general population versus 0.41 % in psychiatric patients(2).

**Conclusions:** Literature review shows only a few cases describing the incubus phenomenon. The prevalence is four times higher in patients with a psychiatric history(2) and should not be confused with psychotic disorder. Recognizing is important for proper treatment, as reoccurring attacks can be treated with anxiolytics, antidepressants, anticholinergics or anti-epileptics, and sleep hygiene methods(1).

**Disclosure:** No significant relationships.

**Keyword:** incubus phenomenon

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**Addictive disorders**

**EPV0664**

**Women substance use in India: An important but often overlooked aspect**

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**Introduction:** Substance abuse has traditionally been considered as a disease of men. Women were believed to have some kind of immunity in terms of “social inoculation”. However, due to change in societal norms and beliefs, substance use is currently increasing among women also.

**Objectives:** To focus on female substance use in India

**Methods:** In India, traditional use of various substances by women during religious festivals is not unknown. Chewing tobacco is a common practice among many women across the country. Cultural use of alcohol has been known in some tribal populations but gradually the use is increasing. There is major difference in pattern of male and female substance use including initiation, progression, recovery and relapse. Women experience greater medical, physiological and psychological impairment and experience loss of control sooner than males. Treatment needs of female substance users is different and requires a gender specific comprehensive strategy which will require medical services, mental health services, services for family and child and employment opportunities.

**Results:** Currently, there is no Indian policy for women substance use. However, Government of India has started a convergence program which includes National AIDS Control Program (NACP), National rural health mission (NRHM) and reproductive or sexually transmitted infection (RTI/STI) to combat some aspects.

**Conclusions:** India is in great need of a policy or at least a standard operative protocol for management of female substance use disorder which may include screening for substance use disorder for all females accessing health sector, counselling, referral to addiction services, formation of a treating team and after-care.

**Disclosure:** No significant relationships.

**Keywords:** women; Substance use; India; Need

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**EPV0667**

**Analysis of risk factors in patients with alcohol delirium who have been treated at the Riga Psychiatry and Narcology Center in 2018**

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doi: 10.1192/j.eurpsy.2021.2165

**Introduction:** Alcohol abuse can be the cause for psychotic disorders. In the International Classification of Diseases (ICD10) they are coded F10.4-F10.9. One of the potentially life-threatening complications is the development of alcohol delirium. Mortality rates in patients with untreated alcohol delirium reach 15%. It is extremely important to identify the risk factors that contribute to the development of delirium in time to ensure the most effective treatment and to ensure the patient’s potential survival in the hospitalization and post-hospitalization phase.

**Objectives:** To analyze and evaluate the risk factors that have caused alcohol withdrawal with the development of delirium in patients admitted at the department of Narcology of the Riga Psychiatry and Narcology Center in 2018.

**Methods:** This study is a retrospectively conducted cohort study based on data from inpatient medical records for patients diagnosed with alcohol-induced delirium at the Department of Narcology of the Riga Psychiatry and Narcology Center in Year 2018.

**Results:** In the Riga Psychiatry and Narcology Center 113 patients were diagnosed alcohol caused delirium. That makes up to 8% of all inpatients in year 2018. Summary of the prevalence of the most significant risk factors in 2018 inpatients with alcohol delirium.

| Risk Factor                                | Prevalence |
|--------------------------------------------|------------|
| High levels of aspartate aminotransferase   | 95%        |
| Tachycardia                                | 76%        |
| High levels of alanine aminotransferase     | 54%        |
| Low platelet count                         | 51%        |
| High systolic blood pressure               | 50%        |
| High diastolic blood pressure              | 46%        |
| Other somatic diseases                     | 45%        |
| Previous history of detoxification         | 37%        |
| History of alcohol-induced seizures        | 13%        |

**Conclusions:** The study indicated that some easily determined parameters are potential clinical predictors for the development of delirium tremens.

**Disclosure:** No significant relationships.

**Keywords:** delirium tremens; Predictors; Alcoholism; Alcohol withdrawal

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**EPV0665**

**Telephone interviews among a cohort of gambling patients at the time of COVID-19**

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**Introduction:** Background: Little is known about the modifications in gambling patterns during the Covid-19 pandemic, which has shown signs of increase, particularly for individuals with preexisting gambling problems.

**Objectives:** Our aim was to assess the behaviour of a cohort of patients in the Trentino Region.

**Methods:** A semi structured questionnaire containing Hamilton Depression Rating Scale as well as open-ended questions on gambling activities, specifically online gambling, was administered over the telephone. The survey was administered for two months over the lockdown period (April-June 2020) and took approximately 20 minutes to complete.

**Results:** About 50 responses were collected. Data are currently analyzed and will be available at the time of the Congress.

**Conclusions:** Will be show at the time of the Congress.

**Disclosure:** No significant relationships.

**Keywords:** Gambling; Lockdown; Survey; COVID-19

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**Disclosure:** No significant relationships.