

mother as lighter, more reliable, more anxious and more affectionate than women without experience of pregnancy and motherhood ($p < 0.05$).

Conclusions: Women experienced miscarriage are characterized by more idealized ideas about motherhood probably due to problems with pregnancy and frustration of the desire to become a mother.

Disclosure of Interest: None Declared

EPV2017

Navigating the Hormonal Labyrinth: Understanding the Impact of Menstrual Cycle Dynamics on ADHD Symptoms

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Introduction: Attention-deficit/hyperactivity disorder (ADHD) is a prevalent neurodevelopmental disorder characterized by significant sex differences in symptomatology, prevalence rates, and associated developmental challenges. Research indicates that these disparities are not merely superficial but are rooted in complex biological, psychological, and social factors. Despite the growing recognition of these differences, the underlying etiological mechanisms remain inadequately explored.

Objectives: This study aims to propose a framework addressing hormonal fluctuations in females with ADHD, emphasizing the cyclical nature of ovarian hormones and their impact on executive functioning and behavioral regulation. We hypothesize that hormonal changes exacerbate ADHD symptoms during specific menstrual cycle phases, ultimately enhancing our understanding of sex differences in ADHD and informing future research and treatment strategies.

Methods: We conducted a literature review to synthesize studies on estrogen levels, executive function, and ADHD symptoms. Our focus was on the role of estradiol (E2) in cognitive functions, particularly in the prefrontal cortex, and the effects of cyclical hormonal changes on behavior and cognition in females with ADHD during adolescence and the menstrual cycle.

Results: Evidence suggests that estrogen is crucial for cognitive control, with fluctuations in hormone levels impacting mental performance in women. Notably, ADHD symptoms are more likely to manifest during periods of rapid estrogen decline, particularly within the menstrual cycle. These hormonal decreases correlate with reduced executive function and self-regulation at two critical phases: increased risk-taking behaviors during the mid-cycle (periovulatory phase) and heightened avoidance and negative emotions in the perimenstrual phase. Research indicates that drops in estradiol (E2) can lead to significant increases in inattention and hyperactivity-impulsivity symptoms, especially in young adult women with high impulsivity traits. Additionally, the organizational effects of puberty may interact with hormonal changes, particularly in females with advanced limbic system development, increasing the risk of emotional dysregulation and impulsive behavior. Changes in the limbic system, essential for emotional

processing and memory, further underscore the importance of considering individual sensitivity to hormonal variations.

Conclusions: This framework emphasizes the importance of hormonal influences in diagnosing and treating ADHD in females. By recognizing the relationship between hormonal fluctuations and ADHD symptoms, particularly via the Multiple Hormone Sensitivity Theory, we advocate for a tailored treatment approach. Future research should focus on longitudinal studies to deepen understanding and develop targeted interventions, thereby improving ADHD management and quality of life for females.

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EPV2019

Prevalence and predictors of generalized anxiety disorder in women during the postpartum period

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Introduction: Up to 10% of women experience severe anxiety symptoms during pregnancy and the postpartum period, which are often underdiagnosed and undertreated, leading to negative outcomes for both mother and child.

Objectives: This observational study aims to assess: 1) the prevalence of Generalized Anxiety Disorder (GAD) in the postpartum period, and 2) identify its predictors.

Methods: All women attending the Gynecology and Obstetrics Department at "L. Vanvitelli" University Hospital were invited to participate in the study. Women who provided consent were assessed within three days after delivery using a specifically designed form for sociodemographic and clinical data collection, the Labor and Delivery Questionnaire (LDQ) for obstetric and gynecological information, and the Italian versions of the following assessment tools: Edinburgh Postnatal Depression Scale (EPDS) and the Generalized Anxiety Disorder 7-item scale (GAD-7). A GAD-7 score of ≥ 10 was used as the cutoff for moderate to severe Generalized Anxiety Disorder.

Results: A sample of 110 women with a mean age of 30.74 (± 5.67) years, predominantly Caucasian (91.8%), was recruited. Of these, 18.8% ($n = 20$) had GAD-7 scores indicating a diagnosis of Generalized Anxiety Disorder. Compared to women without GAD, those with GAD were significantly more likely to be unemployed or face difficulty finding work ($p < 0.05$), have a family history of anxiety disorders ($p < 0.05$), have other children ($p < 0.05$), experience conflicts with their parents ($p < 0.001$), and score higher on the EPDS ($p < 0.001$). Logistic regression analysis showed a higher likelihood of having GAD among younger women (OR: -0.029; $p < 0.05$), those with a positive family history of anxiety disorders (OR: 0.63; $p < 0.05$), and those with higher EPDS scores (OR: 0.044; $p < 0.001$).

Conclusions: The study highlights that age, employment status, and a family history of anxiety disorders may be significant predictors of GAD in peripartum period. Further studies with larger samples are necessary to confirm these findings; however, collaboration between psychiatrists, gynecologists, and obstetricians is recommended to identify women at risk of developing GAD early