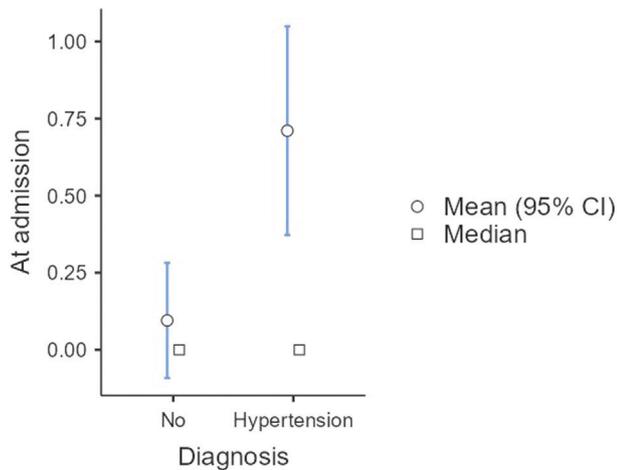


related to pregnancy. However, it is noteworthy that more than half of the patients had target organ damage, reclassifying patients at higher cardiovascular risk. Following guidelines and using preferred combinations controlled cardiovascular events 100% during follow-up.



P200 INCIDENCE OF LENVATINIB INDUCED ARTERIAL HYPERTENSION IN THYROID CARCINOMA: A RETROSPECTIVE ANALYSIS OF A SERIES OF CASES

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Background and Objective: Advanced thyroid cancer leads to worse overall survival and a higher risk of locoregional recurrence. Tyrosine kinase inhibitors have emerged as a management alternative in these conditions. However, serious adverse effects such as high blood pressure are common in clinical trials and real-life studies. The objective of this study was to evaluate the incidence of arterial hypertension in patients undergoing treatment for advanced thyroid cancer with the tyrosine kinase inhibitors lenvatinib

Methods: This is a retrospective cohort study of patients with advanced thyroid cancer being managed with Lenvatinib, a tyrosine kinase inhibitor. The incidence of arterial hypertension after the start of treatment was evaluated.

Results: Among the subjects included in the study (n=26), the mean age was 64.6 ±11.8; 57.7% were women and hypertension occurred in 88.5% (23/26), being CTCAE grade ≥ 3 in 43.5% (10/23). In 12 of 23 it occurred due to exacerbation of pre-existing hypertension and in 10 of 23 it corresponded to de novo hypertension induced by the drug. A patient presented grade 4 hypertension due to posterior reversible encephalopathy syndrome. 6 patients died during follow-up, all developed hypertension during treatment with Lenvatinib.

Conclusions: High blood pressure is a common and early adverse effect in the management of advanced thyroid cancer with Lenvatinib. Management strategies to improve drug tolerability may improve disease outcomes, treatment adherence and patient-related outcomes.

P201 SEVERITY OF STRESS DISORDERS IN UKRAINIAN REFUGEE WOMEN: IS THERE ANY ASSOCIATION WITH THE PRESENCE/ABSENCE OF HYPERTENSION?

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Background and Objective: Refugees exhibit a notably high prevalence of post-traumatic stress disorders (PTSD). PTSD has been associated with hypertension, particularly in military servants, war veterans and more recently in populations exposed to chronic violence. In this prospective study, we explored the association between hypertension and the severity of emotional distress and PTSD in Ukrainian women seeking asylum in Poland.

Methods: The study included 504 refugee women: 301 non-hypertensive and 203 hypertensive subjects (mean blood pressure (BP) levels: 119±11.8 and 144±11.7 mmHg, respectively). BP was measured using validated oscillometric devices. Participants filled validated questionnaires to assess emotional distress (DASS) and PTSD (PCL-5). Subjects with and without hypertension were compared for both general and psychological characteristics.

Results: There were no significant differences in non-hypertensive and hypertensive subjects in terms of socio-economic status before the war and the intensity of hostilities in the regions of Ukraine where the refugees came from. Compared to non-hypertensive subjects, hypertensive refugees had significantly higher DASS score (26.8±14.3 vs. 23±14.2, p=0.003) and general emotional distress (72.4 vs 50.4%, p<0.0001). Significant differences were found between groups for all indicators of DASS questionnaire (depression, anxiety and stress) with a predominance of their severity among hypertensive women (p<0.01). Hypertensive refugees had also significantly higher PTSD score (29.9±14.7 vs. 25.5±14.6, p=0.001) and presence of PTSD (41.1 vs 28.3%, p=0.01). Dimensions of all PTSD clusters were significantly higher in hypertensive women: intrusion (cluster B, p<0.0001), avoidance (cluster C, p=0.027), negative alteration in cognition (cluster D, p=0.036) and hyper-arousal (cluster E, p=0.028). At the same time, logistic regression analysis revealed a significant relation between hypertension and only one indicator of stress – PTSD cluster B (p<0.0001).

Conclusion: Hypertensive refugee women had more pronounced emotional distress and PTSD than non-hypertensive participants. Among all studied indicators of emotional distress and PTSD, re-experiencing traumatic events was the stress element most strongly associated with hypertension. Our findings will be further explored with a detailed cardiovascular assessment, re-evaluation of stress questionnaires and psychiatric consultation of refugees.