Keywords: psychiatry; Psychoanalysis; Medical Body

EPP0723
Setting up a clinical psychology service for reception department with consultative care
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Introduction: There is a plenty of literature on providing psychological services for psychiatry inpatients and outpatients. Seeing a psychiatrist for the first time can be stressful.

Objectives: This paper will identify challenges in setting up a clinical psychology service for consultees seen in Reception Department with consultative and primary specialized health care. 'Clinical psychology service' is a project in Moscow Research Institute of Psychiatry providing services within the Reception Department setting. A need to address mental ill health issues (getting a diagnosis and treatment plan) within the broader psychosocial needs of consultees has been identified.

Methods: Clinical psychology established a brief intervention 'service' for consultees. Issues of establishing trust within this population suggested the need to provide a 'named' male or female psychologist. The psychologist accompanied psychiatric consultants’ recommendations to familiarize a consultee of the availability of the service. Evaluation of the service, including uptake, client satisfaction, and outcome, is ongoing using quantitative and qualitative methods. Data is presented on key themes identified in providing psychological services to consultees.

Results: Key themes identified included: 1. Service development: establishing trust, ensuring confidentiality, close between consultants working, flexibility, crisis management, safety, establish links with other agencies; 2. Complex psychological and social needs: mental health issues, trauma, substance misuse, domestic and sexual violence.

Conclusions: Consultees present with a range of complex psychosocial needs. While this population may have reservations about accessing 'standard' mental health services, a flexible psychology service working in close liaison with psychiatric consultants may be effective in addressing these needs.

Keywords: Reception Department; Consultees; Brief intervention service; Clinical psychology

EPP0724
Prevalence of ADHD in the adult population in the Czech Republic and frequency of medication
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Introduction: Attention Deficit Hyperactivity Disorder (ADHD) is a common neurodevelopmental disorder often diagnosed between the ages of 7 and 10. The estimated prevalence of ADHD in adults is usually 2-5%, which means that in up to half of people this diagnosis persists into adulthood.

Objectives: The aim of this sub-study was to determine whether there are significant differences in ADHD symptomatology between individuals who have taken or are taking prescription drugs and those who have never taken them.

Methods: Data collection was performed by STEM / MARK in January 2019 through the European National Panel. Respondents completed a demographic questionnaire focusing on the history of ADHD and a standardized ADHD Self-Report Scale (ASRS) questionnaire for the symptomatology of ADHD in adulthood.

Results: Of the 1,518 respondents, 3% reported being diagnosed with ADHD / hyperkinetic disorder during their lifetime. According to the ASRS assessment, 119 respondents were classified as suspected ADHD. Overall, men scored higher symptoms of ADHD. The results also show that the group that states that taking medication has a statistically significantly higher average score in ASRS than unmedicated individuals. 6 individuals are taking medication to this day.

Conclusions: The data collected confirm our main hypothesis that ADHD symptomatology has an impact on the daily functioning of individuals in adulthood. Unlike peers with reduced or no ADHD symptoms, these people are far more likely to have time management issues, need to plan their day carefully, and yet often experience problems such as late arrivals due to a lack of anticipation.

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Keywords: adult ADHD prevalence; ASRS; medication

EPP0726
An outpatient clinic for integrative mental health: Patient and treatment characteristics and health outcomes based on patient reported routine outcome monitoring data
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Introduction: There is an increasing interest in integrative (mental) health care and a growth in centers offering such services, but a paucity of research on patient characteristics, diagnosis, treatments offered, the effects of those treatments and patient satisfaction.

Objectives: To examine the course of mental health outcomes in the context of the nature and quality of care of outpatients at a center for integrative psychiatry in the Netherlands, as well as relevant sociodemographic, clinical, and treatment-related moderators of this course.
Methods: Baseline patient demographics, clinical and treatment characteristics of 537 patients with a completed care episode between 2012 and 2019 were assessed. Satisfaction and mental health treatment outcomes were examined using routine outcome monitoring and analyzed with multilevel intention-to-treat models.

Results: Two-thirds of patients were women (median age 41 years), predominantly with a primary diagnosis of mood or anxiety disorder. Mean number of treatment sessions was 49 (SD=94) and total clinical time was 54 hours (SD=109). Mean treatment duration was 460 days (SD=407). Ninety percent of the sample filled out one or more assessment(s). Of the individuals with a baseline assessment, 50% completed a follow-up. Significant improvements in symptomatology, social functioning, interpersonal functioning, wellbeing, resilience and quality of life were found. Clinical and scientific interpretation, moderator analyses and patient satisfaction will be presented at the conference.

Conclusions: Although no definite conclusions can be drawn due to the naturalistic design and missing data, especially at follow-up, the results will be presented at the conference.

Keywords: routine outcome monitoring; integrative psychiatry; psychopathology, functioning and wellbeing.

EPP0729

Relationship between emotional exhaustion and empathy in medical students from Monteria - Colombia

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Introduction: Empathy is considered one of the most relevant characteristics in the interaction between the doctor and the patient, highlighting the need to enhance it from the professional training stage. However, some studies have established that high levels of empathy could generate emotional exhaustion (Boujut, Sultan, Woeber & Zenasni, 2012). However, if a certain type of empathy can lead to burnout, it must also be considered that an optimal empathic posture can, on the contrary, relieve stress and exhaustion.

Objectives: Establish the relationship between the level of emotional exhaustion and empathy in medical students.

Methods: A cross-sectional study of correlational scope was conducted in 182 (n = 90) medical students. The cognitive and affective empathy test (López, et al., 2008) and the adaptation of the MBI instrument for professional burnout, it must also be considered that an optimal empathic posture can, on the contrary, relieve stress and exhaustion.

Results: Statistically significant correlations of positive magnitude were evidenced between the variables emotional exhaustion and cognitive empathy (Table 1).

Conclusions: It was possible to conclude that the higher levels of cognitive empathy (adoption of perspective) in medical students, also resulted in greater emotional exhaustion, revealing an inappropriate consequence of empathy, where professionals can excessively adopt the patient’s feelings, generating wear. It is essential to promote optimal levels of empathy, which are beneficial for both the patient and the doctor.

Keywords: empathy; exhaustion; doctors in training

EPP0730

Sexting in young university of the colombian caribbean, a comparative study between male and female

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