

## EPP0719

**Arson and Schizophrenia: A Case Report and Review of Literature**G. Gill<sup>1\*</sup>, S. Rothman<sup>2</sup>, G. Yadav<sup>1,2</sup> and P. Riess<sup>1</sup><sup>1</sup>Bronx Care health System, Psychiatry, Bronx, United States of America and <sup>2</sup>BronxCare Health System, Psychiatry, New York, United States of America

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**Introduction:** Firesetting is a behavior, arson is a crime, and pyromania is a psychiatric diagnosis. Arson is a criminal act in which a person or group of persons willingly and maliciously sets fire or aid in firesetting to cause harm to property, people, and infrastructure. The likelihood of an arson offender having schizophrenia is 20 times greater than that in the general population. Here, we describe the case of a male in his 50's, a first-time arsonist, who suffered from schizophrenia since his late teens prior to the onset of random firesetting behavior.

**Objectives:** To understand the association between Arson and Schizophrenia.

**Methods:** A case report, as well as a review of the literature, was conducted.

**Results:** The patient is a male in his 50's carrying a diagnosis of Schizophrenia with over 50 inpatient hospitalizations. He was observed standing on the threshold of a neighbor's apartments where he allegedly set fire to a pile of clothing. These charges are based upon allegations that he attempted to set fire to a 14-storey apartment building. At the time of his assessment, he was floridly psychotic. He was found not fit to stand trial. He was restarted on Clozapine and Depakote which is the medication he had the most success with.

**Conclusions:** Literature shows that Arson and firesetting behaviors are quite commonly seen in patients with mental disorders. Arson often has sequelae that negatively impact the community. The strong correlation between firesetting behavior and mental disorders needs extensive, detailed collaboration between psychiatry, legal expertise, and fire services.

**Disclosure:** No significant relationships.

## EPP0718

**Selective serotonin reuptake inhibitors and violent crime: do SSRI's kill or cure?**S. Snee<sup>1\*</sup> and S. Petrykiv<sup>2</sup><sup>1</sup>GGZ Westelijk Noord Brabant, Psychiatry, Halsteren, Netherlands and <sup>2</sup>GGZWNB, Psychiatry, Halsteren, Netherlands

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**Introduction:** SSRI's are consistently associated with violent events in the adult population. However, the causality between SSRI use and violent behaviour was never found. Several recent studies draw the attention to this hypothesis while they were inspired by several mass murderers in the United States.

**Objectives:** A literature research on studies exploring the association between SSRI use and violent behaviour.

**Methods:** The authors performed a literature search (1966–2020) using PubMed and Embase to review studies where a possible link between SSRI's and violent behaviour in adults was assessed.

**Results:** 94 studies were identified, of which 6 studies were included. There is no association between the use of SSRI's and violent behaviour in the general population. However, an increased hazard of violent behaviour was observed in young man and those with a history of violent crime.

**Conclusions:** Overall, SSRI treatment is safe in the general population. Certain subgroups can, however, be vulnerable to aggressive flare-ups, especially during on-treatment period and the first 12 weeks after drug discontinuation. Therefore, careful monitoring throughout these critical periods is strongly recommended.

**Disclosure:** No significant relationships.

**Keywords:** SSRI; violent behaviour

**Promotion of Mental Health / Prevention of Mental Disorders**

## EPP0719

**The relationship between mothers' attachment style, mindful parenting, and perception of the child**B. Szabó<sup>1\*</sup> and M. Miklósi<sup>2</sup><sup>1</sup>Eötvös Loránd University, Department Of Developmental And Clinical Child Psychology, Budapest, Hungary and <sup>2</sup>ötvös Loránd University, Department Of Developmental And Clinical Child Psychology, Budapest, Hungary

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**Introduction:** Maternal attachment style plays a major role in the intergenerational transmission of psychopathology. Previous studies indicated that a secure attachment style is associated with higher levels of mindfulness and a higher quality of the parent-child relationship.

**Objectives:** The aim of this study was to explore the relationship between the mothers' attachment style, mindful parenting, and perception of the child.

**Methods:** Data was collected from 144 non-clinical mothers, who have a child below the age of 3 years. Mothers completed self-report questionnaires including the following scales: a demographic questionnaire, Attachment Style Questionnaire (ASQ), Interpersonal Mindfulness in Parenting Scale (IMP), and the Mothers' Object Relations Scale (MORS-SF). Mediation analyses with Mothers' Object Relations Scale warmth and invasion subscales as dependent variables, mother's attachment style as an independent variable and, mindful parenting as a mediator were conducted.

**Results:** In mediation analysis, the direct effects of the mothers' attachment style on the perception of the child were not significant. However, indirect effects through mindful parenting were significant; higher levels of mindful parenting were associated with higher levels of MORS-SF warmth and lower levels of MORS-SF invasion.

**Conclusions:** These findings suggest that attachment styles are related to the perception of the child through mindful parenting.

Mindfulness-based parenting training might be useful in case of attachment-related problems to improve the parent-child relationship.

**Disclosure:** No significant relationships.

**Keywords:** mindful parenting; maternal attachment; child perception; mindfulness

## EPP0720

### Are the Kessler Psychological Scales suitable for screening for mental disorders in low-threshold mental health services in German-speaking countries?

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**Introduction:** The Kessler Psychological Distress Scales (K10 and K6) are used as screening tools to assess psychological distress and are the first-line assessment of need for help in the Headspace services.

**Objectives:** Thus, we studied the psychometric properties of their German versions in a Swiss community sample to evaluate their potential usefulness to screen for mental disorders or relevant mental problems in low threshold transdiagnostic German-speaking services.

**Methods:** The sample consisted of 829 citizens of the Swiss canton Bern of age 19-43 years. K10/K6 were validated against Mini-International Neuropsychiatric Interview (M.I.N.I.) diagnoses, questionnaires about health status and quality of life. Receiver Operating Characteristic (ROC) curve analyses were used to test for general discriminative ability and to select optimal cut-offs of the K10 and K6 for non-psychotic full-blown and subthreshold mental disorders.

**Results:** Cronbach's alphas were 0.81 (K10) and 0.70 (K6). ROC analyses indicated much lower optimal thresholds than earlier suggested; 10 for K10 and 6 for K6. At these thresholds, against M.I.N.I. diagnoses, Cohen's Kappa ( $\leq 0.173$ ) and correspondence rates ( $\leq 58.14\%$ ) were insufficient throughout. Values were higher at the earlier suggested threshold, yet, at the cost of sensitivity that was below 0.5 in all but three, and below 0.3 in all but six cases.

**Conclusions:** For the lack of sufficient validity and sensitivity, respectively, our findings suggest that both K10 and K6 would only be of limited use in a low-threshold transdiagnostic mental health service – comparable to Headspace – for young adults in Switzerland and likely other German-speaking countries.

**Disclosure:** No significant relationships.

**Keywords:** screening; general population; concurrent validity; Mental Disorders

## EPP0721

### Attenuated positive and negative symptoms in patients at clinical high-risk for psychosis

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**Introduction:** The clinical high-risk for psychosis (CHR) is mainly established by the presence of attenuated positive symptoms (APS), but there is evidence of the role of attenuated negative symptoms (ANS) in the development of psychotic spectrum disorders. It is important to establish a link between APS and ANS in patients at CHR in order to improve early detection of psychosis.

**Objectives:** Establish the relationship between APS and ANS in depressive patients at CHR.

**Methods:** 130 depressive young in-patients at CHR with APS (average age 19.5) and 71 ones with ANS (average age 19.5) were examined. The HDRS scale was used to assess depressive symptoms, the SOPS scale was used to assess APS and ANS, and the SANS scale was used to assess ANS. The results are presented in median values.

**Results:** No differences were found between two groups in the severity of depressive symptoms on the HDRS scale and CHR symptoms on the SOPS scale (22 vs 23.5 and 45 vs 43 respectively). Statistically valid differences have been established between the groups in the APS severity on the sub-scale of positive symptoms SOPS: 11 and 7 ( $p = 0.001$ ). No differences in the ANS severity on the sub-scale of negative symptoms were detected (17 and 18.5,  $p = 0.207$ ). There were also no differences in the ANS severity on the SANS scale (40 and 47,  $p = 0.163$ ).

**Conclusions:** It has been established that patients at CHR with APS also have ANS, which may have clinical significance for early detection of psychosis.

**Disclosure:** No significant relationships.

**Keywords:** Attenuated negative symptoms; Clinical high-risk; Attenuated positive symptoms; Early detection

## EPP0722

### Burnout among early career psychiatrists in Russia – results of a cross-sectional study

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**Introduction:** Despite the long history of burnout studies, the problem of burnout among psychiatric specialists in Russia is insufficiently studied. The risk of burnout is the highest among psychiatrists in the first 10 years of their career.

**Objectives:** To assess the prevalence and severity of burnout in early career psychiatrists (ECPs) in Russia.