save time and money for psychiatric health systems. Lastly, concerning Virtual Reality (VR) in psychiatric care, 57% of participants were familiar with VR technology, but only 43% were acquainted with its applications in psychiatry. Notably, 71% did not view VR as a viable replacement for in-person psychiatric management.

Conclusions: This is the first study conducted on understanding digital psychiatry in Pakistan's healthcare system, which revealed multiple challenges to digital health competency among psychiatrists. This emphasizes on the need for formal training and funding towards resources to overcome obstacles in utilizing mental health technologies.

Disclosure of Interest: None Declared

EPV0434

Patterns of Internet Addiction in an Italian sample: 100% of the sample experience Nomophobia

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Introduction: Internet Addiction Disorder, a concept introduced for the first time by Ivan Goldberg in 1995, is one of the most recently identified forms of addiction, but already considered a real psychosocial phenomenon, capable of having a profound impact on different aspects of social and psychological life of individuals. One of its most recently identified manifestations is Nomophobia, a neologism formed from the combination of terms such as "no mobile", "phone" and "phobia", which can be understood as the fear of feeling disconnected. It is today considered a situational phobia, characteristic of contemporary times. The most common symptoms include excessive cell phone use and constant anxiety at the thought of losing the internet connection. Others are, for example, "Ringxiety", ringing anxiety, or the "phantom vibration syndrome".

Objectives: This study aims to examine the spread of Nomophobia in the Italian population, evaluating psychopathological correlations that can explain its diffusion.

Methods: Between January and May 2023, an anonymous online questionnaire was randomly sent to the general population. Alongside with tests to evaluate psycho-social features, the instrument used to study Nomophobia was the *Nomophobia Questionnaire* (NMP-Q) (Yildrim *et al.* Comput Hum Behav. 2015; 49:130–7), in its Italian version (Adawi *et al.* JMIR MHealth UHealth. 2018;6:e24).

Results: The sample consists of 308 people (189 F, 119 M), with an average age of 32 years (*sd* 14). In our sample, 100% of the subjects tested positive for Nomophobia. Values indicating a state of severe Nomophobia are found in 12.3% of the sample (F 15.9%, M 6.7%). The young population, between 18 and 25 years old, represents 54% of the affected population, but more than 60% of severe cases (95% confidence interval 50-65%). The severe cases correlate positively (p<0,05) with findings of high impulsiveness. There are no other studies that investigate the psychopathological correlates of Nomophobia among Italians.

Conclusions: Despite possible *biases,* the data obtained are an alarming sign of the spread of internet addiction that characterizes our times, of which the excessive use of cell phones in the form of Nomophobia is an expression. Despite their now undisputed usefulness, mobile devices are capable of causing the onset of serious health problems, starting from exposure to radiation capable of causing dermatitis, tumors, and infertility. Furthermore, they dramatically interfere with driving safety, becoming a major cause of road accidents. Considering these consequences, it appears to be extremely important to characterize the phenomenon, as well as its psychosocial determinants, in order to proceed with its better definition and prevention.

Disclosure of Interest: None Declared

EPV0435

Assessing empathy among caregivers: a cross-sectional study

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Introduction: Empathy plays an important role in everyday human relationships. It is the ability to put oneself in the place of others, to represent what they think and feel. In healthcare settings, several studies have highlighted its positive effects on patients in terms of physical and psychological well-being.

Objectives: Evaluate empathy among caregivers.

Methods: This is a cross-sectional study, conducted over a 1- month -period and enrolling nursing staff working at Farhat Hached Academic hospital. Empathy was assessed using the Jefferson Scale of physician's empathy (JSPE) scale.

Results: A total of 92 caregivers were enrolled in this study. The average age was 40.41 years with a sex ratio of 0.95. The most represented category was nurses (64.1%) with an average seniority of 17.2 years. The average empathy score was 98.4. Scores above half were reported in 69.5% of cases. The presence of empathy was significantly associated with female gender (p=0.002).

Conclusions: Empathy is a key point in the patient-caregiver relationship. Thus, the nursing staff must be aware of this concept in order to improve the quality of care.

Disclosure of Interest: None Declared

EPV0436

The opportunity for e-mental health to overcome stigma and discrimination

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Introduction: Many with mental illness do not seek treatment, often due to stigma; be it public, self, or institutional type. To improve outcomes, stigma needs addressing.

Objectives: Understand the opportunity for e-mental health to help overcome stigma and, to provide an expert opinion to foster its adoption.

Methods: We conducted literature searches using the terms ((mental health) AND ((stigma) OR (discrimination))) AND (((((digital tools) OR (digital services)) OR (healthcare apps)) OR (digital solutions)) OR (digital technology)), limited to 2007 – 2023, identifying 223 citations, 9 of which were relevant for this evaluation, including 4 systematic reviews (**Table 1**).

Results: Literature reports suggest that e-mental health may be useful for addressing stigma and reducing the treatment gap. While it was not consistently as good as face-to-face services, e-mental health tools were frequently shown to be effective in reducing stigma, improving mental health literacy, and increasing help-seeking behaviors. Tools included web-based breathing, meditation, and CBT; suicide prevention apps; and online videos and games. Experts from a 2022 global Think Tank session convened by eMHIC, opined and emphasised that embracing e-mental health must not leave people behind nor reinforce inequality and that structural barriers must first be acknowledged and overcome. Creating a shared understanding of the challenge and of terminology is essential, as is codesigning any solution together with people with lived experience.

Conclusions: Published data suggest that e-mental health is promising to reduce stigma and discrimination, with the potential to foster help-seeking and treatment engagement. Adoption requires attention to derailers and must foster inclusivity. There is an imperative to adopt e-mental health, especially evidence-based solutions.

Table 1. Systematic literature reviews

Study	Interventions	Findings
SLR + meta-analysis, 9 studies, n=1916 (Goh et al. Int J Ment Health Nu 2021;30:1040–1056)	- Web-based program - MIDonline - AboutFace - BluePages - MoodGYM - MHFA eLearning - Beyond Silence	Online vs offline: similarly effective for reducing public stigma
SLR, healthcare setting (Pospos,et al. Acad Psychiatry 2018;42:109–120)	- Breath2Relax - Headspace - Meditation Audios - MoodGYM - Stress Gym - Virtual Hope Box - Stay Alive	Identified tools provide a starting point to mitigate burnout, depression, and suicidality
SLR, 13 interventions for stigma (Johnson, et al. Indian J Psychol Med 2021;44:332–340)	- Web-based, psychoeducation interventions - Online games - Mobile app	Most interventions increased help-seeking
SLR + meta-analysis, 9 RCTs, n=1832 (Rodriguez-Rivas, et al. JMIR Serious Games. 2022; 10: e35099)	- Video games - Virtual reality - Videoconferencing and online chat	Interventions had a consistent effect on reducing public stigma

EPV0437

Randomized controlled trail of work-map: telehealth metacognitive intervention for work performance enhancement of adults with attention-deficit/hyperactivity disorder

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Introduction: The literature has emphasized the importance of implementing evidence-based occupational therapy teleinterventions to enhance work participation in adults with attention-deficit/hyperactivity disorder (ADHD).

Objectives: This study aimed to evaluate the efficacy of an innovative metacognitive self-tailored teleintervention for adults with ADHD performance at work enhancement (Work-MAP). The outcome measures were efficacy of and satisfaction with the performance of self-selected work goals (Canadian Occupational Performance Measure), executive functions (Behavior Rating Inventory of Executive Function-Adult), and quality of life (Adult ADHD Quality of Life Questionnaire).

Methods: In this randomized controlled trial, participants were 46 adults with ADHD. Group A ($n = 31$) received the synchronous, hybrid-telehealth intervention in 11 weekly 1-hour individual sessions, while Group B ($n = 15$) completed the same intervention after a waiting phase.

Results: Following the intervention, participants demonstrated and maintained significant improvements in all outcome measures (strong-to-moderate significant effects) to the 3-month follow-up.

Conclusions: Work-MAP seems to be effective intervention for enhancing work participation (i.e., performance at work), executive functions, and quality of life of adults with ADHD. Future studies with larger samples and additional objective measures are needed to further validate these findings.

EPV0438

Chatbots for Well-Being: Exploring the Impact of Artificial Intelligence on Mood Enhancement and Mental Health

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