

**EPV0824****Perceived barriers and facilitating factors prior to the implementation of a lifestyle focused approach in the treatment of inpatients with mental illness.**

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**Introduction:** Despite the increasing evidence for the efficacy of lifestyle interventions for people with mental illness (MI), there has been little change in routine clinical care. There are several factors that can complicate or facilitate the implementation of a lifestyle intervention. Gaining insight into such factors can contribute to effective integration into clinical practice.

**Objectives:** To assess the perceived barriers and facilitating factors of healthcare professionals (HCPs) and inpatients of psychiatric wards for the use of a lifestyle focused approach, prior to its implementation.

**Methods:** Baseline data from an open cohort cluster randomized stepped wedge study. Barriers and facilitators with regards to the intervention, HCPs and inpatients, and the organization were assessed with the measurement instrument for determinants of innovations, online, or through a semi-structured interview.

**Results:** Initial results show that inpatients (N=167) experience both barriers and facilitating factors with regards to themselves and the innovation. They perceive the innovation as complex and see few personal benefits, but indicate that they consider it part of their treatment. Healthcare workers (N=77) perceive facilitating factors related to themselves and the organization, such as expected support, but were not sufficiently aware of the content of the innovation. More detailed exploration of relationships with demographic and disease-related factors are currently being conducted.

**Conclusions:** These findings provide insight into the perceived barriers and facilitators of inpatients and HCPs regarding a lifestyle focused approach, prior to its implementation. More insight into relationships with demographic and disease-related factors can benefit application into routine clinical care.

**Disclosure:** No significant relationships.

**Keywords:** Lifestyle; Implementation; mental illness; barriers and facilitators

**EPV0822****Assessment of Knowledge and attitudes of psychiatric nurses toward electroconvulsive therapy**

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**Introduction:** knowledge and attitudes of psychiatric nurses should be continuously evaluated and updated to ensure a quality care in electroconvulsive therapy (ECT) unit.

**Objectives:** Assessment of the psychiatric nurses knowledge and attitudes towards ECT.

**Methods:** A cross sectional descriptive study was conducted in multiples psychiatric departments in Razi Hospital Tunisia between January and April 2021. We asked 30 psychiatric nurses using a questionnaire evaluating their knowledge and attitudes towards ECT technique and its impact on the medical care.

**Results:** Our study revealed a lack of knowledge on ECT among psychiatric nurses. In fact, 93% of nurses reported that schizophrenia represents the most frequent indication. Pregnancy was considered as a contraindication by all participants. ECT was not recognized as a first line treatment and Only few knew the complete medical checkup before ECT. As for their opinion about this technique, 73 % of the nurses have a positive attitude towards ECT and think that it is very effective .

**Conclusions:** Nurses have a major role in the progress of every ECT-session .For that, specific training can only improve their knowledge and promote more positive attitude toward ECT.

**Disclosure:** No significant relationships.

**Keywords:** Nurses; attitude; Electroconvulsive therapy; knowledge

**EPV0824****Prevalence of Maternal Psychological Distress in pregnant women who receipt prenatal diagnosis of fetal Central Nervous System (CNS) anomalies**

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**Introduction:** Women receiving a prenatal diagnosis of fetal anomalies are a high-risk population for psychological distress leading to mood disorders. Even so, to date we have no evidence of studies who investigated the levels of maternal anxiety and depression in pregnant women receiving a prenatal diagnosis of fetal CNS anomalies.

**Objectives:** The aim of this study was to assess the prevalence of anxiety and depression levels in a pilot sample of pregnant women at the Prenatal Diagnostic Unit of the Bambino Gesù Children Hospital.

**Methods:** We collected data among 43 women who receipt fetal brain anomaly diagnosis (mean age: 35 yrs, SD  $\pm$  6.3, range 19-48 yrs; mean week at first access 26w, SD  $\pm$  3.9, range 18-33w). Prenatal diagnosis including: ventriculomegaly (37.2%), posterior cranial fossa (23.3%), choroid plexus cysts (11.6%), anomalies of CC (7%) and other (20.9%). Pregnancies with assisted reproductive

technology were 14%. We use the Patient Health Questionnaire (PHQ-9) and the Generalized Anxiety Disorders (GAD-7) questionnaires to assess anxious-depressive symptoms.

**Results:** showed a rate of mild-to-severe anxious depressive symptoms by 60.5% and 48.8% respectively. In detail: 41.9% mild, 14% moderate and 4.7% of severe anxiety. Meanwhile, 41.9% mild and 7% moderate depression. The prevalence of comorbid depressive and anxiety symptoms was 39.5% among the entire sample.

**Conclusions:** Preliminary data showed a high prevalence of anxious depressive symptoms and comorbidity among pregnant with CNS fetal anomalies. Women receiving a fetal CNS anomaly diagnosis may need additional psychological support or counselling.

**Disclosure:** No significant relationships.

**Keywords:** Prenatal diagnosis; CNS anomalies; Anxiety; Depression

## EPV0825

### Schizophrenia stigma in mental health professionals and associated factors: A systematic review

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**Introduction:** The consequences of schizophrenia stigma are numerous and highly damaging to individuals, their families, the health care system and society. Mental health professionals (MHP) are considered to be one of the main sources of stigmatization.

**Objectives:** To identify the characteristics of MHP stigma in schizophrenia in comparison with other psychiatric disorders, the specificities of MHP compared with other social groups, and associated factors.

**Methods:** Following PRISMA guidelines, we systematically searched multiple electronic databases for articles: (i) reporting original data published in English in peer-reviewed journals, (ii) reporting quantitative data with statistical analysis, (iii) assessing stigma in a broad sense, and (iv) including samples composed only of MHP.

**Results:** A total of 38 articles published from 1999 to 2019 and involving 10926 MHP fulfilled our inclusion criteria. Studies showed that schizophrenia is the most stigmatized mental illnesses in MHP, despite recent results suggesting that borderline personality disorder and substance abuse may be more stigmatized. In comparison with other social groups, MHP reported less dangerousness beliefs and more positive beliefs regarding pharmacological treatment. Nevertheless, results were less consistent regarding prognosis and desire for social distance. Age, education level, type of mental health profession, or length of practice were associated factors that showed inconsistent relations with stigma. Work setting and biological causal beliefs were more clearly associated with MHP stigma.

**Conclusions:** These findings provide strong support for the need to conduct specific research on schizophrenia stigma in MHP and the importance of controlling for several variables to identify predictors of stigma.

**Disclosure:** No significant relationships.

**Keywords:** mental health professionals; schizophrénia; stigmatization

## EPV0826

### Comprehensive rehabilitation and resocialization in mental health care after surgery of head and neck tumors

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**Introduction:** There is increasing number of head and neck tumors. Modern medical technologies allow to save lives, but lead to cosmetic and functional defects. DSM-V clarifies that "life threatening illness or debilitating medical condition is not necessarily considered a traumatic event". However, cancer diagnosis and treatment influence on mental health. Patients after surgery of head and neck tumors need special rehabilitation, because of loss or impairment of speech function. This significantly reduces communicative potential, changes social status, reduces rehabilitation potential.

**Objectives:** During 6 years we have conducted studies to improve methods of psychological and pedagogical diagnostics, optimize speech therapy and psychological support for increasing effectiveness of speech rehabilitation.

**Methods:** Speech rehabilitation was carried out with correctional-pedagogical technologies and psychological support. We used Achieving Tendency Scale, Questionnaire measures of Affiliative Tendency and Sensitivity to Rejection, narrative interview, Scale of speech utterance implementation, rehabilitation potential evaluation, general condition assessment by ECOG and Karnovsky, auditory assessment. Speech therapy included methods for eliminating dysphagia, normalizing speech breathing, improving utterance realization. Psychological support kept meaning-narrative approach.

**Results:** Number of patients without difficulties or with slight difficulties in speech utterance implementation increased by 57.1%. Number of patients with high rehabilitation potential increased by 48.8%.

**Conclusions:** Psychological and pedagogical rehabilitation and resocialization after surgery of head and neck tumors has positive effect on mental health of patients, forms special rehabilitation motivation, helps to avoid disability and to transform life in new conditions.

**Disclosure:** No significant relationships.

**Keywords:** mental health; rehabilitation; head and neck tumors; resocialization

## EPV0828

### Paralization and online adaptation of an ongoing clinical trial in La Paz University Hospital (Madrid, Spain) during the COVID-19 worldwide pandemic

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