

Methods: We examined the ability to diagnose and propose treatment of various Generative AI versions (CHatGPT/CHATGPTpro etc.) and then compare the results with 10 clinicians performing the same task. Then a group of 10 psychiatry specialists not involved in the first evaluation assessed whether the diagnosis and treatment were established by Generative AI or a clinician.

Results: The results showed that the generative AI systems were able to provide valid diagnosis in most of the cases with favour to newer and most proficient version of CHATGPT. Proposed treatment results were less accurate. The comparison between human and AI group was hard to accurately assess, with tendency to favouring psychiatrists group assessment as the right decision.

There is huge need to further explore the possibilities and limitations of Generative AI use in psychiatry.

Conclusions: There is huge need to further explore the possibilities and limitations of Generative AI use in psychiatry.

Disclosure of Interest: None Declared

EPV0441

Evaluation of an App-based brief Cognitive Behavioral Therapy for individuals with Nonsuicidal Self-injury

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Introduction: Nonsuicidal self-injury (NSSI), the deliberate and direct destruction of one's own body tissue without suicidal intent, has represented a significant public health concern among adolescents and young adults worldwide, yet they have limited access to evidence-based interventions. App-based digital therapy, with its advantages of high cost-effectiveness, accessibility, and user receptivity, could be an effective intervention for NSSI. We expected that the use of an app-based brief cognitive-behavioral therapy (CBT) would improve depressive symptoms and emotion dysregulation, the most prevalent symptoms among individuals with NSSI.

Objectives: This study aimed to evaluate the efficacy of a 3-week app-based brief CBT program focusing on cognitive distortion correction for individuals with NSSI.

Methods: A total of 34 participants who engaged in NSSI were included in the final analysis, with 18 individuals assigned to the 'app group' and 16 to the 'waitlist group.' The brief CBT program consisted of three quizzes designed to prompt the users to identify cognitive distortions embedded in a series of short scenarios, develop more realistic perspectives, and imagine advising to significant others. The app group was instructed to complete three quizzes per day for three weeks, while the waitlist group received no intervention.

Results: Baseline and follow-up assessments of depression and emotion regulation were conducted. After the 3-week program, the app group showed a significant reduction in depressive symptoms ($F = 8.30, P = .007$) compared to the waitlist group. There was no group difference regarding emotion regulation.

Conclusions: Depression is a prominent symptom in individuals with NSSI. Our findings suggest that an app-based brief CBT

intervention targeting cognitive distortions can effectively alleviate depression in individuals with NSSI. The results also highlight the need for digital interventions that are tailored and designed to improve emotion regulation in this population.

Disclosure of Interest: None Declared

EPV0443

Mitigating Psychological Symptoms in Public Safety Personnel Through Supportive Text Messaging Program

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Introduction: Public safety personnel (PSPs) often suffer from mental health issues due to the challenging and intricate nature of their work. Various barriers may prevent them from seeking necessary support and treatment. Therefore, implementing innovative and cost-effective interventions can potentially enhance the mental well-being of PSPs.

Objectives: The study sought to assess the influence of the Text4PTSI program on symptoms of depression, anxiety, trauma, and stress, as well as the resilience of public safety personnel after six months of receiving supportive text message intervention.

Methods: PSP subscribed to the Text4PTSI program and received daily supportive 1 SMS text messages for six months. Participants were invited to complete standardized self-rated web-based questionnaires to assess depression, anxiety, posttraumatic stress disorder (PTSD), and resilience symptoms measured on the Patient Health Questionnaire-9 (PHQ-9), Generalized Anxiety Disorder-7 scale (GAD-7), Posttraumatic Stress Disorder Checklist-Civilian Version (PCL-C), and the Brief Resilience Scale (BRS), respectively. The assessment of mental health conditions was conducted at enrolment, six weeks, three months, and six months after enrollment.

Results: One hundred and thirty-one subscribers participated in the Text4PTSI program. A total of 31 participants completed the baseline survey, and 107 total surveys were recorded at all follow-up time points. The baseline prevalence of likely major depressive disorder (MDD) was 47.1%, likely generalized anxiety disorder (GAD) was 37.5%, low resilience was 22.2%, and likely PTSD was 13.3%. At six months post-intervention, the prevalence of psychological conditions. There was a decrease in the mean scores on the PHQ-9, GAD-7, PCL-C, and the BRS from baseline to post-intervention by 25.8%, 24.7%, 9.5%, and 0.3%, respectively. However, the decrease was only statistically significant for the mean change in GAD-7 scores with a low effect size ($t(15) = 2.73, p = 0.02$).

Conclusions: The results of this study suggest a reduction in the prevalence of likely MDD as well as the severity of anxiety symptoms from baseline to post-intervention for subscribers of the Text4PTSI program. The program has the potential to complement existing services, aiding in mental health support for public safety personnel.

Disclosure of Interest: None Declared