

EPV1249

The challenge of therapeutic adherence in patients with first-episode psychosis: The rise of pharmacogenetics

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Introduction: During the last decades, clinical practice for patients with first-episode psychosis has shifted to early intervention programmes that aim to accelerate access to treatment and also ensure adherence to antipsychotic (AP) medication. However, recent pragmatic, randomised controlled trials still report very high discontinuation rates of the initially prescribed AP treatment due to lack of efficacy, side effects, or other reasons. The CLinical Utility of early intervention including the 5-Step Precision Medicine (5SPM) Method in first-episode Psychosis (CLUMP) Project is a translational research initiative focused on improving adherence to antipsychotic medications and therapeutic outcomes in first-episode psychosis patients using pharmacogenetics. We present a preliminary descriptive analysis of this project based on a retrospective cohort.

Objectives:

- To establish discontinuation rates of the first antipsychotic treatment administered to patients with a first-episode psychosis before the implementation of the CLUMP project.
- To describe reasons for such discontinuations.

Methods: We conducted an observational study on a consecutive, retrospective cohort of 49 patients who experienced a first-episode psychosis in Salamanca, Spain, before the implementation of CLUMP, in order to subsequently determine the impact this project might have on AP treatment discontinuations. We reviewed their clinical records to collect variables such as sex, age, first prescribed antipsychotic medication, and any discontinuation within the first year post-treatment initiation, recording reasons for discontinuation or treatment changes, such as lack of efficacy, non-adherence, side effects, or others.

Results: Of the 49 patients included in the analysis, 7 were excluded due to inaccessible information, leaving a final sample of 42 (26 males). Age ranged between 16 and 48 years, with a mean age of 25.9 (9.2). 38 patients (90.47%) discontinued treatment within one year, with similar rates in men (92.3%) and women (87.5%) (See Figure 1). 16 reported side effects as the main reason for discontinuation, 1 lack of efficacy, 9 lack of adherence, and 12 other reasons (Figure 2). Among the 16 who discontinued due to side effects (Figure 3), 3 experienced extrapyramidal symptoms, 3 drowsiness, 3 sexual dysfunction, 2 hyperprolactinemia/galactorrhea, 1 metabolic syndrome, 1 excessive salivation, and 3 did not specify the symptom.

Image:

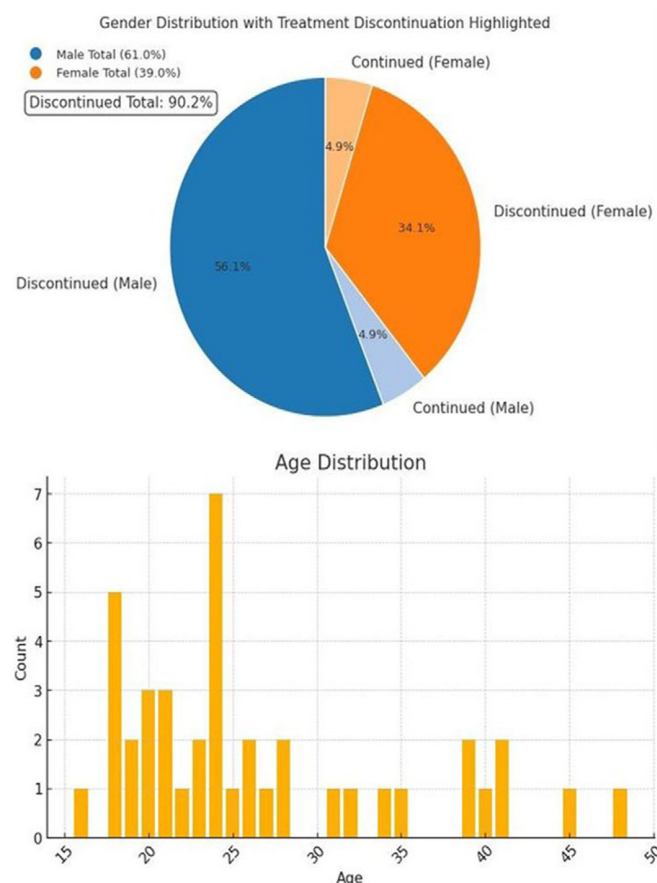


Image 2:

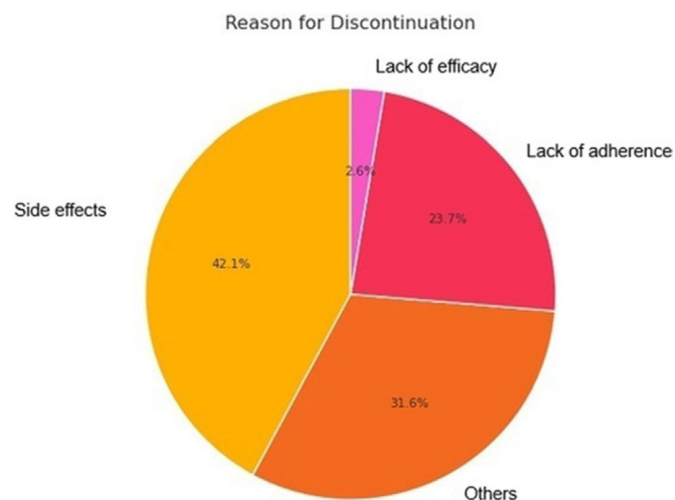
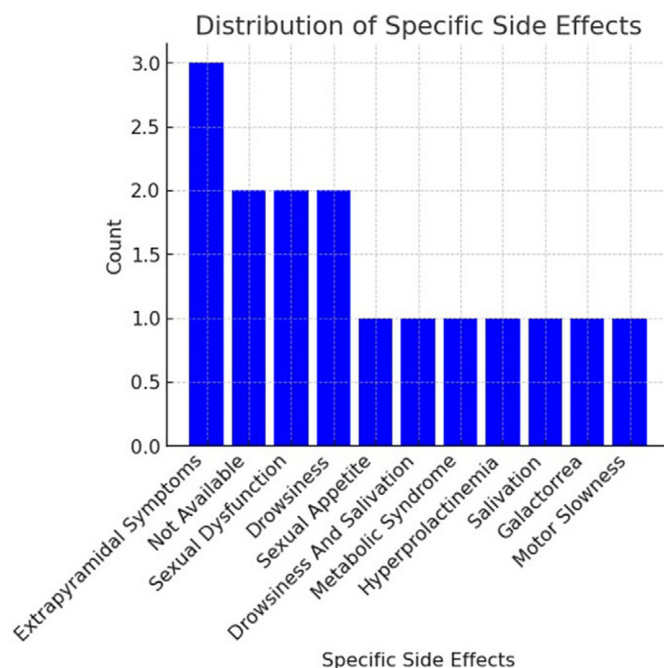


Image 3:

Conclusions: Most patients in our sample discontinued antipsychotic treatment within the first year post-treatment initiation, mainly due to side effects. These data indicate the need to restructure clinical care for patients with first-episode psychosis to ensure adherence to AP and reduce trial-error approaches to treatment choice from start. The CLUMP project proposes an individualised strategy, based on pharmacogenetics, to improve therapeutic adherence and outcomes in patients with FEP.

Disclosure of Interest: None Declared

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ADAPTATEA Program: Humanizing Healthcare for ASD Patients in Their Referral Hospital

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Introduction: Autism Spectrum Disorder (ASD) is a neurodevelopmental disorder with increasing prevalence (1 in 36 children, CDC 2023), associated with difficulties in social interaction and repetitive behaviors. These characteristics make it challenging for individuals with ASD to access quality healthcare. Additionally, people with ASD experience a higher number of underlying and intercurrent comorbidities compared to neurotypical individuals. In Spain, we have a public healthcare system intended to provide universal health coverage for all citizens. In 2009, the AMITEA program was created in central Madrid to address healthcare needs for 6,000,000 people (Parellada et al., Eur Psychiatry 2013;

28(2):102-109). However, despite this, patients in our hospital, located in Majadahonda on the outskirts of Madrid, continued to face difficulties accessing healthcare. Main challenges include leaving familiar surroundings and healthcare professionals, long waiting times, difficulties understanding the public healthcare system, and lack of coordination between services. We realized that, even with the program, our patients were still not receiving adequate care.

Objectives:

- To create an integrated program in our hospital that addresses the most common health issues for individuals with ASD.
- To provide ASD patients with healthcare attention as similar as possible to that of neurotypical patients within their referral hospital.

Methods: Given the difficulties our patients faced, professionals from Child Psychiatry, Neuropediatrics, Neurophysiology, and the Pediatric ER formed a network in 2018 to improve healthcare for ASD patients in our hospital. Child Psychiatry acted as a link between services. We held group meetings with department leaders to develop the program in each service. Neurophysiology was the first to fully implement it (Mayoral-Fernandez et al., Metas Enferm 2022; 25(5):70-8).

Results: Thanks to our efforts and support from hospital management, a part-time nurse joined the program in October 2023. With her help, we adapted medical procedures using Alternative Communication systems, trained and advised staff, adjusted hospital spaces, and maintained continuous coordination with professionals and families, humanizing care at our hospital.

By January 2024, our network included 17 services and over 50 professionals. With group support, each service developed its own level of adaptation. Professional satisfaction increased, and specialist coordination improved.

Conclusions: Adaptations like those implemented through ADAPTATEA improve the healthcare experience for ASD individuals at their referral hospitals, highlighting the need for more programs of this kind.

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EPV1251

Factors Affecting Psychological Resilience in First Responders and Rescue Team Members

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Introduction: Disasters, including natural catastrophes, accidents, and man-made events, impose significant challenges on communities and individuals. First responders, such as rescue teams, firefighters, and prehospital emergency medical services personnel, play a crucial role in mitigating these impacts. Beyond their physical capabilities, these individuals must possess high levels of psychological resilience to perform effectively under extreme and stressful conditions. Understanding the factors that influence this resilience is essential for improving their performance and well-being. This systematic review aims to identify and examine the factors that affect psychological resilience among first responders and rescue team members during disasters and emergencies. The goal is to provide