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EPV1026

Impact of Pandemics on Primary Care: Changes in GP Antidepressant Prescriptions and Mental Health Referrals During Lockdowns in England, UK

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Introduction: The COVID-19 pandemic disrupted primary health-care services, affecting mental health support and antidepressant prescriptions in England. This study examines shifts in GP referrals and antidepressant prescribing patterns during different phases of lockdown.

Objectives: This research aims to (1) analyze changes in the rates of antidepressant prescriptions across lockdown periods, and (2) investigate how GP referrals to mental health services, including social prescribing, evolved, with a focus on disparities among ethnic groups.

Methods: Using a retrospective design, we analyzed electronic health record data from GP practices in North England, covering March 2018 to June 2023. We employed a two-level negative binomial-logit hurdle model for antidepressant prescriptions and a multinomial logit regression model for referral types.

Results: Antidepressant initiation decreased during lockdowns, while ongoing prescriptions showed minor increases. GP referrals to social prescribing rose significantly, especially among ethnic minorities who also had fewer medical treatments. Lockdown phases influenced referral patterns, with reductions in secondary care referrals and growth in community-based support.

Conclusions: The study highlights a shift towards social prescribing amid the mental health strains of the pandemic, suggesting its role in a social model of health. Ethnic disparities in mental health care access emphasize the need for culturally inclusive, non-clinical mental health support.

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Mental Health Policies

EPV1028

Innovative Strategies in Precision Psychiatry: Merging Artificial Intelligence with Psychoneuroimmunology for Enhanced Mental Health Outcomes

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Introduction: The paradigms of diagnosis and evaluation in mental health are changing due to the incorporation of artificial intelligence (AI) into other fields. Understanding mental health conditions is greatly aided by insights from neuroscience, immunology, social and clinical psychology, and cultural theories. According to Martyn

Evans' commentary, interdisciplinary work generates new issues and solutions while multidisciplinary work preserves unique viewpoints. In this sense, the interdisciplinary field of psychoneuro-immunology has contributed significantly to our understanding of mental health. It has also contributed significantly to the interplay between the immune system, the endocrine system, and the nervous system. This field could rapidly emerge as a key component of integrative diagnosis and assessment.

Objectives: This review emphasizes the need for comprehensive biopsychosocial assessment frameworks and the importance of harmonizing disciplines through multidisciplinary and interdisciplinary methodologies to enhance diagnostic possibilities via AI.

Methods: A critical review of clinical psychology was conducted, as well as a discussion of the necessity of using integrative methodologies in order to address the interconnected nature of both medical diseases and mental disorders, in light of recent advancements in artificial intelligence.

Results: It has been explored how PNI can serve as an interdisciplinary ground for cross-disciplinary dialogue and how stakeholder perspectives may resolve complexities in clinical assessment and psychiatric diagnosis through extending PNI with AI and applications. Integrating AI into PNI is crucial for revolutionizing mental health care, utilizing machine learning to consolidate diverse data streams and predict outcomes.

Conclusions: Lastly, it was outlined some pragmatic frameworks for clinical assessment, taking into account time, budget constraints, and stakeholder interests. Ethical, governance, and practical challenges of AI integration are discussed. The paper proposes innovative AI-driven enhancements in psychiatric assessment, diagnosis, and treatment, fostering transformative developments in clinical psychology and promoting a humanistic approach to mental health care.

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EPV1030

The "Polo Cassia" project: a mental health service for integrated treatments of co-occurring disorders in adolescents and young adults

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Introduction: The term "co-occurring disorders" (COD) refers to the coexistence of two or more psychiatric disorders especially substance use disorder (SUD) and other psychiatric disorders. In particular, the prevalence of COD increases globally and is linked to a higher risk of worse outcome. Furthermore, especially in adolescence, the goal is to provide an early and proper answer both in terms of care and prevention. On the opposite, there is a lack of integrated management strategies requiring an effective collaboration of different mental health disciplines in order to receive appropriate care. Although European countries have established mental health policies, a lack of comprehensive and structured