

EPP522

Evaluating Cognitive Bias in Psychosis: A Novel Approach Using Large Language Models on Spanish Speech Data

E. Gutierrez Alvarez^{1,2}, A. Barajas^{3,4*} and R. Ayesa^{5,6}

¹Universidad Politécnica de Madrid, NEBULA group, Madrid, Spain; ²MIT linQ - Massachusetts Institute of Technology, Cambridge, United States; ³Department of Clinical and Health Psychology, Autonomous University of Barcelona; ⁴Government of Catalonia, Serra Húnter Programme, Barcelona; ⁵Mental Illness Research Group, Valdecilla Biomedical Research Institute (IDIVAL), Santander and ⁶Biomedical Research Center in Mental Health Network (CIBERSAM), Health Institute Carlos III, Madrid, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2025.771

Introduction: Jumping to conclusions (JTC) is a cognitive bias strongly involved in the genesis of psychotic symptoms. Accurate evaluation of JTC is crucial for early intervention and treatment planning. However, traditional assessment methods are time-consuming and subject to human error. This study leverages state-of-the-art Large Language Models (LLMs) to evaluate JTC in a unique Spanish population database collected through the DISCOURSE protocol at the Instituto de Investigación Marqués de Valdecilla (IDIVAL).

Objectives: Our primary objectives were to:

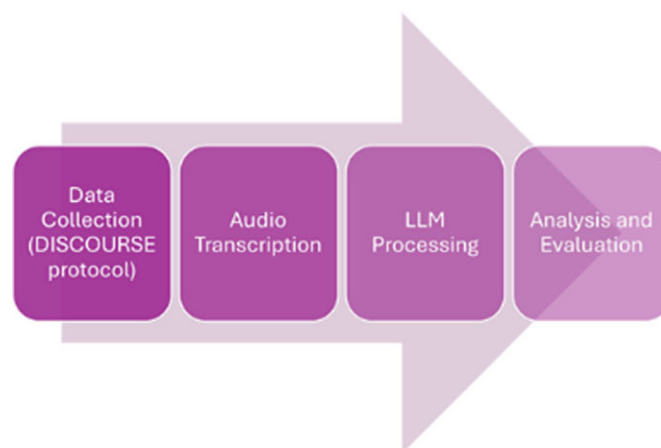
1. Assess the efficacy of LLMs in evaluating JTC bias from transcribed speech.
2. Compare different LLM models and prompting techniques for optimal performance.
3. Explore the potential of AI-assisted cognitive bias evaluation in clinical settings.

Methods: We utilized a database of approximately 170 participants, including patients, controls, and relatives, collected through the DISCOURSE protocol. This protocol is particularly valuable as it includes tasks designed to elicit JTC behaviors, such as ambiguous picture interpretation. Audio recordings were automatically transcribed using two speech-to-text algorithms and manually revised for accuracy.

We investigated various LLM models ("gpt4o", "claude-sonnet-3.5", "llama3", "gemini pro") and experimented with different prompting techniques, including instruction combinations and reasoning scratchpads (Chain of Thoughts).

Results: Our evaluation has provided valuable insights into the potential of LLMs for assessing Jumping to Conclusions (JTC) bias. We observed varying degrees of effectiveness across different LLM models in identifying JTC behaviors from transcribed speech, with some showing promise in capturing subtle linguistic cues. Prompting techniques, particularly Chain of Thought reasoning, demonstrated potential in enhancing the models' analytical capabilities. Given our Spanish-language database, we gained important insights into LLM performance in non-English contexts. Error analysis identified common limitations, informing future refinements. Preliminary findings suggested performance variations across demographic subgroups, highlighting areas for further investigation.

Image 1:



Conclusions: This study represents a step towards integrating AI and automation into clinical workflows for psychosis evaluation and treatment. The understanding of the ability of LLMs to assess JTC from speech samples could significantly enhance the objectivity of cognitive bias evaluations. These findings lay the groundwork for future research exploring the integration of AI in psychosocial interventions for psychosis, including potential applications in cognitive remediation, metacognitive training, and personalized treatment planning.

Disclosure of Interest: None Declared

EPP525

Pathways to care for patients with schizophrenia and severe social impairment

I.-M. Mølstrøm

Psychiatry East, Region Sealand Psychiatry, Research Unit for Early Detection and Psychopathology, Roskilde, Denmark

doi: 10.1192/j.eurpsy.2025.772

Introduction: This presentation sheds light on a group of patients with schizophrenia that are often overlooked. These minority groups include homeless patients and patients with very poor social functioning. Homeless patients with schizophrenia often have complex problems and are difficult to diagnose and treat. While many resources are allocated to early detection and prevention of psychosis programs, few resources are spent on treating the patients who have fallen through the cracks of society and various support systems. These patients are undeniably among the most severely ill psychiatric patients of our time. Patients who are not homeless (domiciled patients) with schizophrenia and very poor social functioning are also often challenging to treat, and they often end up living an isolated existence in their own homes.

Objectives: This presentation will examine the pathways and barriers to care for patients with schizophrenia who are homeless or have serious social function impairment.

Methods: The presentation is based on results from an explorative, cross-sectional study of 85 patients with schizophrenia spectrum diagnosis and severely impaired social function, who either were homeless or domiciled but in need of an outreach team to secure continuous treatment. The study was conducted in Copenhagen in 2020-2024.

Results: We found striking delays in both groups, but most severe in the homeless group. We found a duration of untreated psychosis of ten years and a service delay (period from first contact to psychiatry until a schizophrenia spectrum diagnosis) of four years. Possible reasons for the alarming delays will be discussed, including diagnostic overshadowing and the difficult-to-recognize presentations of schizophrenia. Potential solutions for moving forward will also be highlighted, such as rekindling the diagnostic process.

Conclusions: The overall results from this presentation indicate that there are highly vulnerable minority groups of patients with schizophrenia who have not benefited from the improvements in diagnosis and treatment that we have witnessed in psychiatry in the last 100 years. Acquiring a better understanding of these patients' conditions, symptom presentations, and barriers to timely diagnosis is highly warranted.

Disclosure of Interest: None Declared

Suicidology and Suicide Prevention

EPP527

Enhancing men's engagement in suicide prevention: Integrating masculine norms and personal narratives

C.-E. Notredame^{1,2*}, T. Delbarre³, N. Pauwels⁴, L. Rougegrez⁵, G. Metz⁶ and M. Morgiève^{1,7}

¹3114 National coordination center, CHU Lille; ²Lille Neuroscience & Cognition, Univ. Lille, Lille; ³3114 National coordination center; ⁴Papageno program, F2RSMPSy, St André; ⁵3114 Lille regional center, CHU Lille, Lille, France; ⁶Department of Health Promotion, Maastricht University, Maastricht, Netherlands and ⁷Cermes3, Paris, France

*Corresponding author.

doi: 10.1192/j.eurpsy.2025.774

Introduction: In Western countries, men die by suicide three to four times more often than women, a disparity driven by masculine norms that emphasize stoicism and self-reliance. These cultural expectations often discourage men from seeking help, leading them to face their struggles in isolation. Reluctance to seek support significantly reduces access to the social connections that are vital for suicide prevention. Remote services, such as France's national suicide prevention helpline 3114, offer a discreet and accessible way for men to bypass these barriers and receive the support they need.

Objectives: The national coordination center of the 3114-helpline set out to enhance men's engagement with its services by developing a strategy that accounts for the impact of masculine norms on their willingness to seek and accept help. To ensure the strategy is relevant and effectively addresses the specific needs of men, it aimed to incorporate insights from those who had been directly affected by suicide.

Methods: A Cyclical Evaluation Process was employed to design and assess this digital public health intervention, comprising three key phases: (1) conducting interviews with men who had contacted the 3114 helpline; (2) developing narratives based on their testimonies; and (3) distributing these narratives through social media and the 3114 website. The stories were specifically crafted to boost readers' self-efficacy and encourage help-seeking behaviours. This approach triangulates data to evaluate the narratives' impact on men's attitudes and behaviours concerning suicide prevention.

Results: Phase 1 involved interviews with five men aged 35 to 51, revealing that hegemonic masculine norms, such as stoicism, significantly impede help-seeking behaviors. In Phase 2, a multi-disciplinary team transformed the participants' testimonies into compelling narratives, which were published between April and May 2024. Phase 3 saw these narratives garner 2,264 website visits and 49,782 social media impressions, indicating strong public engagement. The anonymity provided by telephone helplines facilitated emotional expression, helping to redefine traditional notions of masculinity. The stories played a significant role in raising awareness, normalizing help-seeking among men, and actively dismantling harmful gender stereotypes.

Conclusions: Incorporating the narratives of individuals who have experienced suicidal episodes offers a deeper, more nuanced understanding of this complex issue. When shared through empathetic and respectful approaches, testimonies significantly enhance prevention strategies. Co-constructing knowledge with those directly affected leads to interventions that are more relevant, tailored, and responsive to their actual needs. This approach underscores the ethical imperative of amplifying the voices of vulnerable individuals to develop more equitable and inclusive solutions.

Disclosure of Interest: None Declared

EPP528

The Role of Dark and Vulnerable Personality Traits in Self-Harm, Suicide, and Risky Behaviors Among Young Adults in Tehran

K. Qaderi Bagajan^{1,2}

¹Department of Clinical and Health Psychology, Shahid Beheshti University, Tehran, Iran, Islamic Republic Of and ²Psychological Diagnostics group, Department of Psychology, Humboldt-Universität zu Berlin, Berlin, Germany

doi: 10.1192/j.eurpsy.2025.775

Introduction: Suicidal behaviors, non-suicidal self-injury, and risky behaviors are significant concerns in young adulthood.

Objectives: This study investigates the causal relationships between dark and vulnerable personality traits, guilt and shame proneness, and these behaviors among young adults (ages 18-40) in Tehran. Adopting a dimensional and dynamic perspective on personality, the study aims to develop a comprehensive model that incorporates proposed pathological personality traits from DSM-5 (PID-5).

Methods: Using a cross-sectional design and structural equation modeling, the study analyzed data from a large sample of 1,876 participants, including both a general population sample (n=1,696) and a clinical population (n=180) with suicidal/self-harm behaviors or personality disorders. Data were collected using the Short Dark Tetrad (SD4), Triple Scales of Vulnerable Dark Personality Traits,