

repetitive transcranial magnetic stimulation (rTMS), improves hyperactivity, impulsivity, and attention deficit of individuals with ADHD.

Objectives: The aim of this case study is to present the effectiveness of rTMS on hyperactivity, impulsivity, and attention deficit of an individual with ADHD.

Methods: This is a case study of a 22 year old male diagnosed with ADHD. The protocol applied was 2 weeks of daily rTMS sessions. This involved repetitive TMS to the right dorsomedial prefrontal cortex (10 Hz, 3.000 pulses, 120% motor threshold) to treat attention deficit, hyperactivity and impulsivity. Assessments were conducted using Adult ADHD Questionnaires, the Jasper and Goldberg questionnaire and WHO self- reported scale at baseline, 1 month and up to 3 months follow up.

Results: The patient showed overall improvement in scores in both ADHD scales with scores dropping more than 50 % in both scales from pre treatment to 3 months follow up. No side effects were recorded during therapy

Conclusions: Our findings suggest that the use of rTMS therapy in individuals with ADHD, is an efficacious and safe therapeutic treatment option.

Keywords: rTMS; Attention- Deficit Hyperactivity Disorder

EPP1092

Electroconvulsive therapy practice in a general hospital in chile

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Introduction: Electroconvulsive therapy (ECT) is a current, relevant treatment for severe mental illness. In this article we describe our experience on ECT in a public hospital in Chile.

Objectives: Describe a 34 patients' cohort who received ECT and their outcomes.

Methods: Data was extracted from ECT records between 2018-2020, patients' evaluations before and after ECT, and case files. Data was then analyzed and described.

Results: ECT was received by 18 males and 16 females. Age ranged from 19 to 73 years (41 average). More than 75% had 12 or more years of education. Patients' diagnoses and indications for ECT are shown in Figures 1-2

Figure 1: Patients' psychiatric diagnoses

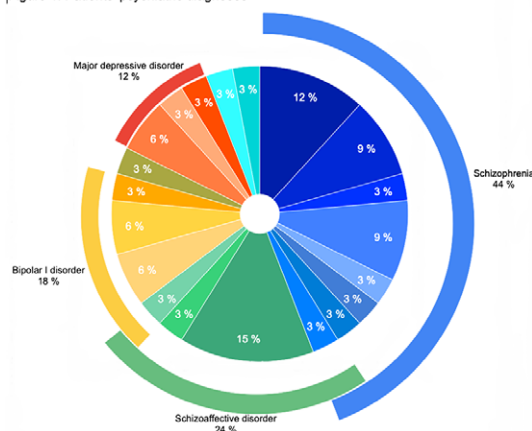
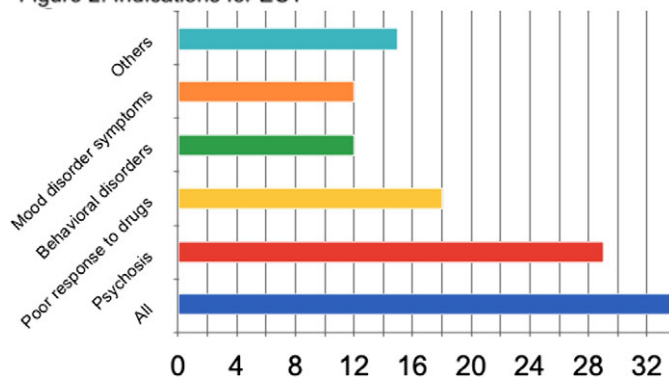


Figure 2: Indications for ECT



The CGI-SI scale was applied to subjects before treatment, and 85% had a score of 5 or more. On average, patients received 8.7 ECT sessions. Right unilateral electrode placement (RUL) was preferred initially for 94% of patients. Brief pulse width (0.3ms) was most commonly used (76%). Seizure duration averaged in 29 seconds. Adverse reactions presented on 32%, most being mild. One treatment had to be stopped due to confusional symptoms post ECT. After ECT, 91% of patients improved according to CGI-GI scale. 55% were assessed CGI-GI 1 "very much improved". MoCA scale was also evaluated, showing a 2,1 point gain.

Conclusions: Schizophrenia and psychosis were the most frequent diagnosis and indication for ECT. RUL and brief pulse width were the preferred settings. This cohort suggests that ECT had an impact on markedly ill patients, based on CGI and MoCA scales.

Keywords: psychosis; Electroconvulsive therapy; General Hospital; schizophrenia

Psychotherapy

EPP1093

The association between work-related factors and use of psychotherapeutic methods with burnout rates in family physicians.

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Introduction: A physicians work is closely related to patients and the understanding of their problems. The use of psychotherapeutic methods is a factor for successful care (Swanson, 1994). At the same time burnout is a syndrome that can affect the health of doctors themselves thus reflecting on the quality of care they can provide (Lloyd et al, 2002).

Objectives: To investigate the use of psychotherapeutic methods in family physicians work in Latvia and the association between burnout rates and the use of these methods in practice as well as different demographic and work-related factors.

Methods: A cross sectional study was carried out. An anonymous online form that contained questions about the demographic data, psychotherapeutic methods/techniques mastering and usage and questions from the Maslach Burnout Inventory was sent out to the publicly available email addresses of family physicians in Latvia. The collected data was analyzed using Microsoft Excel and IBM SPSS software.

Results: Together 54 responses were received from all regions of Latvia. The analysis found association between work hours per week, patients seen per week, usage of psychotherapeutic methods and burnout. More hours per week was associated with higher rates of depersonalization ($p=0,014$) and burnout ($p=0,010$). More patients per week was associated with higher rates of burnout ($p=0,024$). Being unsure if they were using any psychotherapeutic methods was associated with higher rates of depersonalization ($p=0,028$).

Conclusions: The data obtained allows a better insight in to the usage of psychotherapeutic methods, everyday work and the association with burnout rates in family physicians.

Keywords: family medicine; burnout; psychotherapeutic methods

EPP1094

Mindfulness-based cognitive therapy for major depressive disorder- a literature review

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Introduction: Mindfulness-based cognitive therapy (MBCT) is a third wave cognitive-behavioral therapy (CBT) that incorporates meditation exercises in the classical, structured intervention. Mindfulness has been associated with psychological well-being, and certain symptoms that occur in major depressive disorder (MDD), e.g. worries, ruminations, ideas of incapacity or self-devaluation, are considered potential targets for MBCT.

Objectives: To evaluate the current level of evidence for the MCBT efficacy in MDD.

Methods: A literature search was performed in the main electronic databases, targeting clinical trials that evaluated in a randomized manner the efficacy of MCBT versus active comparators or placebo in patients with MDD.

Results: MBCT was efficient in a 10-week randomized controlled trial (RCT) versus standard treatment, and it decreased ruminations, increased patients quality of life, mindfulness abilities, and self-compassion. In another randomized, 8-week RCT, MBCT prevented relapses in MDD, with similar rates when compared to psychoeducation and standard treatment. A 26-month follow-up study evidenced the persistence of symptoms improvement detected after 12 months of the trial, when compared to active control group and treatment as usual. MCBT was compared to cognitive therapy in a randomized 8-week trial, and both treatments had similar efficacy in MDD relapse prevention.

Conclusions: MCBT may be an useful adjuvant to the current treatment in acute MDD, but it may also decrease the risk of relapse after psychotherapy termination.

Keywords: cognitive-behavioral therapy; mindfulness; major depressive disorder; relapse prevention

EPP1097

Integrative psychotherapy of patients with schizophrenic spectrum disorders

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Introduction: Psychotherapy of patients suffering from schizophrenic disorders remains controversial. There are promising descriptions of psychotherapeutic interventions in combination with pharmacological treatment. Some empirical studies show that different forms of psychotherapy are effective. However, there are few models to combine different psychotherapeutic strategies in a comprehensive way.

Objectives: We here propose a model of integrative psychotherapy that is based on the therapeutic alliance and the general principles of understanding and communication. It comprises interpersonal, behavioral, psychodynamic, and existential elements.

Methods: Theoretical principles of different psychotherapeutic schools are applied hermeneutically to a case of schizophrenia. Thus, general methods of psychotherapy gain contextual meaning by the analysis of an individual narrative. The patient himself assessed and approved his case report.

Results: After remission of the acute symptoms, integrative psychotherapy played the major role in the recovery of a young musician. It is shown how the therapeutic alliance and communication in a general sense interacted with behavioral, cognitive, psychodynamic, and existential techniques. It is demonstrated narratively how recovery was facilitated, adjunct to pharmacological treatment, by method-integrative psychotherapy. Basic cognitive-behavioral techniques ensured at first the stabilization of the patient. Then psychodynamic remembering, repeating, and working through became possible. Finally, existential topics and creative solutions dominated the sessions.

Conclusions: Psychotherapeutic method-integration is necessary to treat patients with various mental disorders especially schizophrenia. We propose an ABCDE-Model that comprises the following principles: Therapeutic alliance (A); behavior change (B); cognitive reflection on dysfunctional meanings and beliefs (C); psychodynamic remembering, repeating, and working through (D); and existential understanding and communication (E).

Keywords: method integration; common and specific factors; schizophrenic spectrum disorders; psychotherapy

EPP1098

Alexithymia and gambling: Psychotherapy to differentiate feelings

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