

similar to those observed in patients with a more chronic evolution, since it seems to be an impairment that in most people remains stable, although there is a group of people that worsens. Therefore, these deficits cannot be fully explained by treatments, hospitalizations, or chronicity, and appear more as an intrinsic characteristic of the disease. The course of their trajectory through the progression of the disease remains uncertain.

**Objectives:** This study aimed to evaluate changes in cold, hot, and social cognition during acute psychotic episodes in hospitalized patients, to better understand their relationship with psychotic symptomatology.

**Methods:** A prospective longitudinal study was conducted with 10 patients (age range: 18–65) admitted to the psychiatric acute unit at Jerez de la Frontera Hospital, diagnosed with schizophrenia, schizoaffective disorder, or other psychotic disorders. Cognitive assessments included SCIP (cold cognition), Hinting Task (social cognition), and OSCARS (hot cognition), alongside psychiatric evaluations using PANSS, BPRS, and GAF scales. Statistical analysis was performed to identify correlations between cognitive domains and psychotic symptoms.

**Results:** Analysis of the 10 selected patients reveals that the levels of impairment in cold, warm, and social cognitive functions vary significantly. The mean obtained for the SCIP-S scale total (64.60) suggests a moderate impairment in cold cognition, which aligns with previous research indicating that this type of impairment is an intrinsic feature of psychotic disorders, regardless of the time course of the illness. The mean on the Hinting task (14.00) and OSCAR total score (52.60) reflect impairment in social and warm cognition, respectively. Regarding the PANSS scale, scores indicate a predominance of positive psychotic symptoms, with a mean of 31.50 on PANSS-P, suggesting a high degree of active symptomatology.

These results are congruent with the hypothesis that alterations in warm cognition could precede and perhaps influence the exacerbation of these psychotic symptoms, as has been suggested in previous studies.

**Conclusions:** This study provides preliminary evidence of the complex relationship between cold, warm, and social cognitive functions in patients with acute-phase psychotic disorder. The findings suggest that although these functions are impaired in psychosis, their interrelationship is not as strong as might be expected, underscoring the need for differentiated interventions that address each cognitive domain specifically.

**Disclosure of Interest:** None Declared

## EPV1273

### Work Climate and nurses' mental health: an observational study in an acute hospital ward

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**Introduction:** Since the COVID-19 pandemic, the attention to mental health at work has increased. According to recent WHO reports, 12 billion working days are lost every year to depression and anxiety. The working conditions, particularly the organizational climate, can impact nurses' well-being and mental health. Specifically, in Portuguese nurses, little is known about the relationship between work climate and mental health.

**Objectives:** To characterize the nurses' lifestyle and mental health and correlate the organizational climate to nurses' mental health.

**Methods:** A cross-sectional correlational study was conducted in a Medical-surgical ward in a Portuguese acute hospital. A convenience sample was recruited, excluding the nurses with long-term sick leave. An e-survey was sent to the nurses by the head nurse via institutional emails after the approval of the Ethics Committee. The nurses were asked to fill in sociodemographic, professional, anthropometric and lifestyle inquiry, Mental Health Inventory (MHI– 5) and Work Climate Questionnaire (WCQ). Data was analyzed using SPSS 29.0.

**Results:** 46 Portuguese nurses participated in the study. Most women (87%), aged between 26 and 64 years, have worked for 18 years ( $\pm 8.4$ ). Most nurses consider BMI median = 25.6 ( $\pm 5.4$ ), 75% exercise regularly, 93% are non-smokers, and 67% consume alcohol occasionally. Most nurses rated their sleep as poor quality. Nurses considered they have good health (43.5%) in general and evidenced reasonable mental health (MHI Mean = 19.8  $\pm$  3.9). Male nurses experienced higher mental well-being than females. As for the level of organizational climate, it was found that, on average, scores are close to 4 (neither agree nor disagree). There was a positive correlation between organizational climate and nurses' mental health.

**Conclusions:** This study evidenced a neutral perception of confidence and experience of autonomy of nurses working in an acute hospital in Portugal. There is a need to deepen the knowledge of the level of autonomy experienced by nurses in their work in larger samples and different contexts. The results indicate the need to study this correlation in different settings to explore its effect and impact on nurses' mental health and patient quality of care.

**Disclosure of Interest:** None Declared

## EPV1275

### Interest to better investigate self-recognition and self/other distinction impairments in neurodevelopmental and psychiatric disorders using the double Mirror ALTER EGO paradigm

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**Introduction:** In recent years, the concept of Self/Other distinction (SOD), the ability to differentiate one's own body, actions and

mental states from those of others, has received increasing interest. Studies that have explored SOD in psychiatric or neurodevelopmental disorders generally used static images or movies that progressively morph from one's own face to another's. However, these paradigms may be insufficient for SOD assessment given the centrality of embodiment in the pathophysiology of these disorders. The new Alter Ego double mirror paradigm was developed to specifically explore SOD under greater ecological conditions. This innovative device allows the progressive morphing of one's own face to that of another between two subjects physically facing each other on either side of the device.

**Objectives:** Two pilot studies were conducted to investigate self-recognition and self/other distinction respectively in adolescents with Anorexia nervosa (AN) and Autism Spectrum Disorder (ASD) compared with matched healthy controls through a self/other face identification task using the "Alter Ego" TM double mirror system.

**Methods:** Participants had to watch a double mirror in which their own face was gradually morphed into the face of an unfamiliar other (self-to-other) or vice versa (other-to-self), requiring them to indicate at which point they judged the morph to look more like their own face than the other's face. Two judgment criteria were used: 1) M1: Threshold at which the subject starts recognizing his own face during the other-to-self morphing sequence 2) M2: Threshold at which the subject starts recognizing the other's face during the self-to-other morphing sequence. For participants with AN, in a second part, SOD was reassessed during five different sensorimotor tasks aimed at increasing body self-consciousness.

**Results:** Compared to controls, participants with ASD and AN showed an earlier self recognition in the other-to-self direction and a delayed other recognition in the self-to-other direction. Moreover, contrasting with controls, in ASD and AN participants, the critical threshold for switching between self and other varied with the direction of morphing. Finally, when participants with AN were seated with a backrest and footrest reinforcing the median axis of their body, the self-recognition threshold (M1) increased significantly approaching that of controls.

**Conclusions:** The preliminary results of these studies uncovered novel findings showing first behavioral evidence of impaired self/other distinction in individuals with ASD and AN through an embodied face-recognition paradigm. These results confirm the interest of the Alter Ego double mirror paradigm for the study of alterations in self-consciousness and Self/Other Distinction as a transnosographic dimension common to various neurodevelopmental or psychiatric disorders.

**Disclosure of Interest:** None Declared

## EPV1276

### General practitioner hospitalists in psychiatry – may we help you?

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**Introduction:** Patients admitted to psychiatric services present with several acute and long-term somatic health problems. Psychiatrists

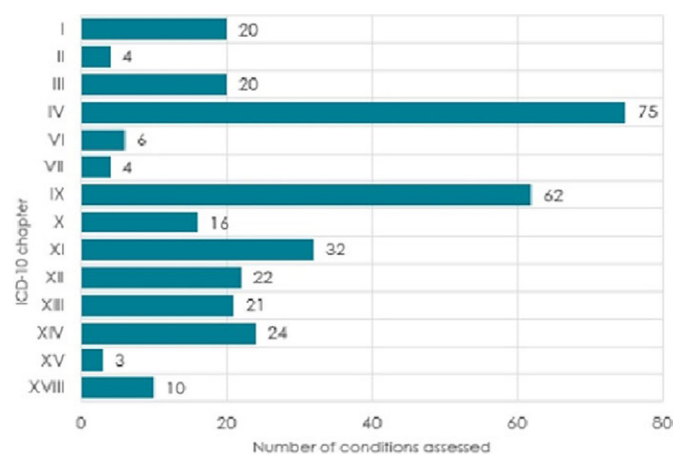
have limited time and expertise to manage those conditions. Nevertheless, general practitioner (GP) hospitalists rarely exist in psychiatric facilities.

**Objectives:** To examine the effects of a novel hospitalist service we describe performance of GP hospitalists.

**Methods:** HUS Helsinki University Hospital Psychiatry has 12 hospital campuses (550 beds in total) and over 30 outpatient clinics in Southern Finland. During February-May 2024 the organization had three part-time GP hospitalists covering 11 acute adult psychiatric wards (307 beds), six forensic psychiatric wards (120 beds), and two out-patient clinics. Hospitalist assessments at hospital wards and outpatient clinics included structured health checks and consultations from psychiatrists and registered nurses. The hospitalists collected characteristics from consecutive assessments by filling in an online survey. Somatic health conditions assessed in consultations, and those needing attention in health checks were coded according to ICD-10 classification.

**Results:** The hospitalists provided 245 assessments: 223 consultations and 22 health checks. The majority (n=146, 60%) of the assessments lasted for 30-90 minutes, one third (n=82, 33%) lasted less than 30 minutes, while some (n=17, 7%) took over 90 minutes. Of the assessments 49% (n=120) were hospitalist's appointments, 12% (n=29) were provided by a phone call, 1% (n=3) were video appointments and 38% (n=93) were solved based on patient records. The most common conditions in the consultations were endocrine and cardiovascular related (Image 1). The hospitalists estimated that eight referrals to emergency departments and 22 to somatic specialists were avoided with the help of the consultations. In turn, hospitalists themselves referred 18 patients to somatic specialists. In the health checks the hospitalists identified 56 somatic conditions needing attention: cardiovascular, endocrine, gastrointestinal, dermatological and vision related problems were the most prevalent (Image 2).

**Image 1:**



**Image 1.** Conditions assessed in consultations according to ICD-10 classification.