

essential to protect the public from the exploitation and risks posed by untrained “therapists.”

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EPV1684

Unconscious processes in psychotherapy and supervision: Difficulties in the supervisory relationship

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Introduction: Supervision is recognized as having a vital role in the professional development of psychotherapists. The way it is implemented has a direct impact on the quality of the educator’s learning process, as well as on the quality of psychotherapy provided to clients. Supervision is a complex and dynamic practice, requiring supervisors to conceptualize the thoughts, feelings and behavior of their educators and the educator’s clients, as well as selective attention to the complexly layered interpersonal dynamics between clients, educators and themselves.

Objectives: Emphasizing the possibility of the appearance of difficulties and their aspects and increasing awareness of these concepts can greatly help supervisors and educators in the formation of ways and approaches that can facilitate better communication and the formation of a more professional relationship as significantly influencing the main result of the quality of psychotherapy and the process of professional development.

Methods: During the training of mental health professionals, it is crucial to ensure that the supervision process is carried out according to a legal, ethical and competent approach, such as informed consent and a supervision contract, and it is necessary to take into account elements such as supervisor and educator competencies, awareness of the challenges of diversity and multiculturalism, personal and professional boundaries, multiple contexts of relationship between supervisor and educator, evaluation and feedback. Through the supervisor’s dilemmas, ambiguities in the perceptions of supervision educators, success is reflected through the analysis of personal contribution, of unconscious interpersonal and developmental dynamics, and access to one’s own limits.

Results: The importance of clinical supervision is evidently recognized by almost all licensing boards and accrediting bodies for the mental health professions, requiring that educators receive psychotherapeutic, clinical supervision as part of their training, and ongoing supervision is often necessary to maintain professional licensure. An integrative approach of incorporating innovative research results, as well as consolidating them with already established factors, is key in leading psychotherapeutic training, research, supervision, as well as the client’s treatment itself towards increased effectiveness. A significant contribution to the literature would be enabled by future research dealing with issues of difficulties in supervision through the prism of educators.

Conclusions: This paper focuses on understanding the significance of the supervision process through the theoretical perspective, approaching the concept of difficulties by the prism of supervisors and educators, and the practical implications of successful supervision.

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Gilles de la Tourette Syndrome and Habit-Reversal: A Case Report

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Introduction: Gilles de la Tourette Syndrome (GTS) is characterised by tics which appear as sudden, rapid, purposeless motor movements and vocalisations. In contrast to other movement disorders, temporary and purposeful suppressibility for a few minutes at a time can be achievable. However, this is ineffective over time. Apart from the physical consequences incurred, tics and their associated neuropsychiatric symptoms can diminish individual quality of life.

Objectives: To present an adult single case study of the implementation of Habit Reversal Training (HbRT) for the treatment of a motor tic and to determine the clinical efficacy of the intervention over time (i.e., post-intervention and at a one-, three- and six-month follow-up).

Methods: A twenty-six-year-old male patient with a well-established diagnosis of GTS was referred to a tertiary-care neuropsychiatry outpatient clinic. Prior to the HbRT intervention, the patient had well-tolerated a continuous tetrabenazine prescription (25mg twice a day). His tic consisted of twitching of his nostrils and sudden and repeated head nods. The tic was reported to being experienced throughout the day and almost always being preceded by a premonitory sensation. The patient’s history was unremarkable with respect to pre, peri-, and postnatal development. There was no family history of tics nor any other movement disorders. Formal measures revealed the following: Clinical Outcomes in Routine Evaluation-Outcome Measure (11), Frost Multidimensional Perfectionism Scale (117), Autism-Spectrum Quotient (2), Adult Attention Deficit Hyperactivity Disorder Scale (1), and Yale-Brown Obsessive Compulsive Scale (15).

Results: By the end of a five-week fifty-minute one-to-one intervention window and at a one-, three-, and six-month follow-up appointment, the following main results are reported: [i] at post-intervention, a self-reported tic improvement score (measuring effectiveness of competing response on tic management since the first appointment) of eighty percent was achieved, [ii] self-reported tic improvement scores carried over to all three follow-up appointments, and [iii] week-to-week monitoring revealed that tic management improved by fifty percent by the third week of the intervention.

Conclusions: This study has accomplished its objectives of offering additional support for the implementation of HbRT for the treatment of a motor tic and to establish the clinical efficacy of the intervention over time. With these objectives in mind, TD and GTS continues to provide clinicians, clinician-scientists, and researchers with an abundance of possibilities for future research. For instance, on a clinical level, it is essential to further characterize variations in motor tic phenotype so that the factors that modify tic behaviour can be clarified. It would also be fascinating to longitudinally study and explore changes in tic frequency and intensity over time following a behavioural intervention such as HbRT.

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