of symptoms and feelings of guilt in the minor, who perceives himself as unable to meet the demands of his relatives.
During Ramadan (he is Muslim), there are difficulties with concentration and lack of energy due to the lack of food and water, leading to a temporary delay in the work.
In an advanced phase of treatment, the minor categorically refuses to come to the clinic, probably due to being mocked by peers in the community, and it is decided to discontinue the sessions, especially since the work had progressed effectively and there was already an intention to gradually discontinue it.

Image 1:

Conclusions: It is believed that the use of hypnosis combined with virtual reality represents an appropriate treatment for post-traumatic stress disorder (PTSD), as it reduces anxiety, strengthens the ego, accelerates the process of change, and directs life in a positive direction. The Juvenile Court has granted family reunification in Germany, and at present, the minor is awaiting departure.

Disclosure of Interest: None Declared

EPV1039

Migration risk factors and their impact on psychological distress among Unaccompanied Migrant Minors in Spain

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Introduction: Unaccompanied Migrant Minors (UMMs) who travel alone and live apart from their families are particularly vulnerable to mental health issues and social exclusion in Spain. Risk factors related to the migratory cycle, including travelling alone, living away from family, and experiencing discrimination, can negatively impact their mental health and increase the risk of social exclusion.
Objectives: This study aims to describe the profile of newly arrived UMM and identify the relevant health risk factors among them, considering factors before, during, and after migration and their impact on psychological distress.
Methods: The study involved face-to-face interviews with 230 minors in foster care placements. The interviews covered sociodemographic information, education and employment situations, factors related to the migratory process (before, during, and after migration), health status, and psychological distress. They were conducted in Arabic or French and translated into Spanish.
Results: The findings revealed that UMMs generally perceived themselves as having good health before migration. However, they often held unrealistic expectations about their new life. Upon arrival, they had to cope with post-migration stressors such as stress ($\beta = 0.468$, SE = 0.142, $p = 0.001$) and discrimination ($\beta = 0.357$, SE = 0.121, $p = 0.003$), which adversely affected their mental health.
Conclusions: The study highlights the impact of post-migration factors on psychological distress among newly arrived UMM. It underscores the need for comprehensive mental health care that considers the different stages of the migratory cycle. Additionally, it advocates for promoting cross-cultural mental health care models and developing policies and services to address and mitigate the effects of post-migration factors, including discrimination against UMMs in Spain.

Disclosure of Interest: None Declared

EPV1041

Closing the Cultural Gap: An Intercultural Day Clinic Experience

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Introduction: Globally, the number of international migrants has been rising, with Europe seeing a significantly higher increase compared to other regions. Migration has been frequently identified in the literature as a risk factor for various mental health issues (Schouler-Ocak et al. Indian J Psychiatry 2020; 62 242-6). Despite this, migrant populations often encounter significant challenges in accessing mental health care services, primarily due to language and communication barriers and cultural differences (Forray et al. BMC Public Health 2024; 24 1593). To improve mental health treatment for migrant populations, it is essential to not only provide cultural competence training for healthcare professionals and ensure access to professional interpreters but also to establish and maintain multicultural treatment teams (Machleidt W. Der Nervenarzt 2022; 73 1208-12). Addressing these needs, we have been operating a multicultural treatment team at our day clinic in Hamburg for the

past year, providing care to Turkish-speaking migrants and native-born patients together.
Objectives: To describe our efforts in developing a cross-cultural center and facilitating effective communication between migrant patients and native-born patients.
Methods: A descriptive overview of our efforts to establish a day clinic model adapted to the cultural and linguistic needs of the migrant (Turkish) population in Germany with a brief review of the relevant literature.
Results: At our day hospital, we provide care for patients with psychiatric disorders who do not require inpatient treatment but for whom outpatient care is insufficient. Our multicultural treatment team is composed of healthcare professionals whose native languages are German and/or Turkish.In our day hospital, patients with a migration background receive psychotherapy and medical consultations in their native language, ensuring they can access the treatment they need without language barriers. Additionally, we aim to improve cultural understanding through collaborative activities. This approach facilitates the development of cross-cultural communication among patients and healthcare professionals from different backgrounds, while also contributing to equal opportunities in psychiatric treatment. The program addresses linguistic, cultural, and religious communication difficulties, aiming to build and sustain meaningful relationships.
Conclusions: The migrant population in Europe continues to grow each day, and mental health care services must adapt to this heterogeneous population and their diverse treatment needs. We advocate for the establishment of treatment centers where migrant populations and native-born patients are considered together, as such centers can play a role in bridging the intercultural communication gap.

Disclosure of Interest: None Declared

Neuroimaging

EPV1042

Common brain activation patterns in schizophrenia patients with auditory verbal hallucinations: A conjunction analysis

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Introduction: Auditory verbal hallucinations (AVH) are one of the primary symptoms of schizophrenia, but the biological mechanisms underlying them remain uncertain (1,2). Theoretical approaches have proposed that AVH are caused by abnormal activity in the auditory cortex; or that they represent misinterpreted cognitive activity such as inner speech. Recently, our group found, using a symptom capture task, that AVH did not trigger activity in the auditory cortex, but instead in language-related areas, thus shifting the focus towards cognitive theories of AVH (3). To date, cognitive approaches have only been preliminarily investigated, and mostly in psychological studies (1,2).
Objectives: Our aim was to test the theory that a disturbance in inner speech processes underlie AVH. We used conjunction analysis to examine common activation patterns between the experience of AVH and phonological encoding.
Methods: Eleven patients meeting DSM-5 criteria for schizophrenia or schizoaffective disorder with near-continuous AVH underwent fMRI during symptom capture and during a phonological encoding task. In the symptom capture task, the patients were instructed to press their left index finger when they begin to hear an AVH, wait three minutes, mentally repeat what they heard, and then press their right index finger. The phonological encoding task required them to indicate, via button press, whether the names of two objects shown in line drawings rhymed.
Pre-processing and analyses were carried out with FSL software using linear models. Activation maps were thresholded at $p<0.05$, cluster-corrected for multiple comparisons. To find regions of common activation between the two tasks, the activation maps from the contrasts of interest were binarized and entered into a conjunction analysis. Regions showing significant activation in both tasks simultaneously were considered activated in the conjunction analysis.
Results: The conjunction analysis showed common activation in several regions involved in phonological encoding, such as Broca's area and its right homologue, supplementary motor area bilaterally, Wernicke's area and cerebellum, in patients with AVH.
Conclusions: These results support a non-perceptual origin of AVH and link them to brain areas related to the phonological loop and working memory in schizophrenia.

Disclosure of Interest: None Declared

EPV1043

Behavior and psychological symptoms in dementia: could be predictors of biology?

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Introduction: Neuropsychiatric symptoms (NPS), prevalent in individuals with mild cognitive impairment (MCI), are linked to functional decline, accelerated dementia progression, and reduced quality of life. In clinical practice, molecular imaging plays a key role in diagnosing cognitive and behavioral issues with high accuracy.
Objectives: This study aims to analyze the correlation between NPS and molecular imaging findings in MCI-diagnosed patients.
Methods: A retrospective, descriptive study was conducted with MCI patients who had undergone Amyloid PET scans (APscan) between January 2019 and October 2024 at Infanta Leonor Hospital in Madrid. Data included demographics, neurological diagnoses, Global Deterioration Scale (GDS) scores, NPS (e.g., depression, psychosis, behavioral and sleep disturbances, anxiety, suicidal thoughts), and PET-FDG/APscan results. Statistical analysis was performed using Dataset and SPSS 22.0.