

Objectives: This paper points out the traditional setting modification and how the interpersonal relationship can affect the therapeutic dynamics.

Methods: The experience could support the possibility to design adequate plans to test possible relational potentiality/prospect to respond to the pandemic emergency. The computer screen represents a very important new and rich element as “Skype” seems to have been the most used remote support. The screen plays a filter and separation function but physically represents the related presence in a shared timeframe. It is also a “mutual mirror”, reflecting the exclusive duality and resending to “different” space and time where the therapeutic relationship acts.

Results: In this way the “analysis room” loses its physical feature to move towards a new dimension where the subjective experience are communicated/lived/re-elaborated by the mean of shared visual, modifying the codified space of a traditional setting.

Conclusions: The screen is not only a mere vehicle of verbal communication, but fully gets in “hic et nunc” in space relationship assuming however an allegoric value, that, in the individual subjective, could go really beyond its “simple” and usual technological function.

Keywords: virtual setting; psychotherapy; covid 19 emergency

EPP0577

Tele-rehabilitation for people with dementia in the COVID-19 pandemic: A case-study

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Introduction: The Promoting Activity, Independence and Stability in Early Dementia (PrAISED) is delivering an exercise programme for people with dementia. The Lincolnshire partnership NHS foundation Trust successfully delivered PrAISED through a video-calling platform during the COVID-19 pandemic.

Objectives: This qualitative case-study identified participants that video delivery worked for, and highlighted its benefits and challenges.

Methods: Interviews were conducted with participants with dementia, caregivers and therapists, and analysed through thematic analysis.

Results: Video delivery worked best when participants had a supporting carer, when therapists showed enthusiasm and had an established rapport with the client. Benefits included time-efficiency of sessions, enhancing participants' motivation, caregivers' dementia awareness and therapists' creativity. Limitations included users' poor IT skills and resources.

Conclusions: The COVID-19 pandemic required innovative ways of delivering rehabilitation. This study supports that people with dementia can use tele rehab, but success is reliant on having a caregiver and an enthusiastic and known therapist.

Keywords: Physical Activity; Tele-rehabilitation; dementia; COVID-19

EPP0578

Mental health mobile apps for patients: Psychiatrists' concerns.

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Introduction: The use of mobile apps aimed at supporting patients with a mental illness is rapidly increasing.

Objectives: The presented results explore psychiatrists' concerns about mobile apps for patients with a mental illness. These results are part of a larger study that examines psychiatrists' attitudes regarding the use and development of mobile apps.

Methods: In the qualitative exploratory study, semi-structured interviews were conducted with 18 psychiatrists in Czech Republic, Austria, and Slovakia. Psychiatrists were recruited via snowball sampling. The interviews were digitally recorded, transcribed verbatim, translated into English, and content analyzed using deductive and inductive category development.

Results: There were mixed feelings regarding mobile apps for patients with mental illness. While psychiatrists emphasized certain benefits (e.g. increasing patients' treatment motivation and engagement), several concerns were also expressed, especially by psychiatrists who were generally unfamiliar with mobile apps. They feared being replaced; were afraid that patients would act as their own doctors, thereby damaging their health; stressed that mobile apps could not respond or be tailored to an individual the same way psychiatrists could tailor treatment to a patient.

Conclusions: The psychiatrists who were more likely to have concerns about mental health apps were those who were generally unfamiliar with the apps and/or thought the apps aim to replace, rather than support, face-to-face treatment. Thus, clinicians and patients should be familiarized with the use of such mobile apps and educated on how they could support the face-to-face treatment.

Keywords: mobile apps; psychiatry; mental health; concerns

EPP0580

Telehealth in children's psychiatric services

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Introduction: Covid-19 intensified public demand for telehealth services in child psychiatry. The shift towards online services raised concerns related to safety and quality of services.

Objectives: The objective of the study was to explore outcomes and perceptions regarding psychiatric telehealth services from the patients' and professionals' perspectives.

Methods: Survey and questionnaires were the main methods to collect feedback after 1129 sessions conducted by psychiatrists and psychotherapists for 559 young patients in 2020.

Results: Overall, patients/caregivers were generally satisfied with the quality of services, despite some technical issues and limitations of the platform. The most common outcomes of the sessions were: psychotherapy, in-depth assessment, pharmacotherapy, in-patient treatment, referrals for in-person appointments with other specialists, parenting strategies. Professionals gave more positive feedback on telehealth services after a few months of practice and training. Psychiatrists preferred conducting telehealth appointments for the patients they have previously seen in-person. The most common diagnosis were various neurodevelopmental disorders (48,9%), as well as patients within F84.0-F84.5 27,9%, and F84.8 (19,8%). Identification challenges, confidentiality and safety maintenance were among the top concerns for mental health workers. Specific guidelines for caregivers helped to use the appointment time effectively, prevent some technical and organizational issues and decrease negative effects of limited communication capabilities during a telehealth appointment.

Conclusions: Telehealth services in psychiatry are meeting real needs of patients, caregivers and professionals, and require further development. Proper training for professionals and clear guidelines for caregivers are among the key factors that enhance the quality of services.

Keywords: Child Psychiatry; telehealth; quality of services

EPP0581

Transdiagnostic internet cbt for mixed anxiety and depressive: Results from a feasibility study in primary care

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Introduction: In response to the treatment gap for anxiety and depressive disorders, psychological treatments with innovative modalities and high implementation potential are essential. Internet CBT (iCBT) is a cost/effective approach that could improve access to a low-intensity evidence-based CBT intervention.

Objectives: To assess the feasibility and acceptability of the French adaptation of the physician-prescribed six-lesson This Way Up transdiagnostic iCBT program for mixed anxiety and depressive disorders developed in Australia.

Methods: Feasibility study with pre- post-intervention evaluations, including an embedded qualitative study in Family Medicine Groups (Quebec, Canada). Inclusion criteria comprise a family physician diagnosis of Major Depression, Panic Disorder, Agoraphobia, Social Anxiety Disorder or Generalized Anxiety Disorder. Primary self-reported outcomes: PHQ-9 (depression) and GAD-7

(anxiety); secondary measures include diagnostic-specific scales and health service utilisation.

Results: Family physicians (N=21) from five Family Medicine Groups prescribed iCBT to 45 patients (30 women, 15 men; mean age = 39.7), 31 initiated the program. To date, 20 patients completed 5 or 6 lessons, nine completed between 2 and 4. Intervention and post-treatment assessments are ongoing, results forthcoming. Results of semi-structured interviews with patients (N=15) and family physicians (ongoing) on iCBT acceptability indicate it is beneficial, practical and easy to use. Program adherence requires patient readiness and determination and could be fostered by motivational support from clinicians.

Conclusions: Results support this French iCBT program's scaling-up potential to contribute to reducing the gap in evidence-based treatments for common mental disorders. Its implementation in primary care could improve the effectiveness, efficiency and equity to a rapidly accessible treatment.

Keywords: Digital therapy; anxiety and depressive disorders; primary care; Cognitive-Behaviour Therapy

EPP0582

Adaptation of a french e-health tool for suicide prevention in young populations: Modalities and benefits

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Introduction: France's suicide rate is among the highest in Europe, with the young among the more at risk than others. Several European projects have demonstrated the effectiveness of using e-tools in suicide prevention particularly for hard-to-reach populations. Lessons from StopBlues, an e-health tool (application/web-site) for suicide prevention in the general population developed in 2018 which was promoted by municipalities and general practitioners, shows the necessity to adapt its content for young people.

Objectives: The objective is to develop an e-health tool, BlueZberry, for suicide prevention targeting adolescents and young adults with psychological pain by adapting StopBlues and its promotional plan.

Methods: The detailed content of BlueZberry and its promotional plan were determined via a literature review and 26 individual and group interviews with experts and youth with StopBlues as a starting part.

Results: The literature review and interviews confirmed the need to adapt the tool according to age of the user since the context and source of psychological pain vary rapidly at this time of life. BlueZberry consists of three modules for age groups 12-14, 15-17 and 18-25 years with specific graphics and messages. Its locally organized promotion should include youth hangouts on top of usual places.

Conclusions: This adaptation of StopBlues will reach a larger audience by offering a more suitable solution for this vulnerable population. A web-portal will serve as an entry point for both StopBlues and BlueZberry where users will be redirected to one of the tools/modules according to their profile and respective needs.

Keywords: adolescent; Suicide; e-tool; prevention