

EPP0778

Psychiatric referrals in general practice

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Introduction: Over half of patients with mental disorders are seen by primary care physicians. However, as for patients with somatic problems, referral to psychiatrists seems to be sometimes necessary.

Objectives: The present study aimed to identify reasons and difficulties perceived by general practitioners (GP) in mental health referrals.

Methods: A cross-sectional web-based survey was conducted between August 22 and September 23, 2020, so that 47 responses of GP were included.

Results: The mean age of respondents was 37.3 years. Their seniority as doctors was 8 years on average. Among them, only 17% attended a post-university psychiatric training. The participants reported that they refer on average 32.5% of patients with mental disorders to psychiatrist: 85.1% to psychiatric hospital, 40.4% to liberal psychiatrists and 21.3% to clinical psychologists. Regarding the reasons for referral to mental healthcare structures, 70.2% of doctors justified their doing so by their insufficient training in mental healthcare; 66% by a need for hospitalization, 57.4% by the presence of delusions, while in 27.7 % of cases, the transfer was carried out at the request of the patient or his family. The difficulties mentioned by GP were patient refusal to consult a psychiatrist (70.2%) and difficulties related to the management delay (44.7%).

Conclusions: Patient and health system factors, as well as physicians experience seem to have important influences on mental health referral. Open communication and ease of consultation with psychiatrists can make the care of patients with mental health problems even more rewarding to the primary care physician.

Keywords: general practice; psychiatrists; referrals; Mental disorders

EPP0774

Assessment of attitudes toward schizophrenia in tunisian family medicine residents

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Introduction: Assessing the attitudes of family medicine residents toward schizophrenia is of greatest concern since family physicians potentially have a key role in identifying the signs and symptoms of schizophrenia at earlier stages and in engaging young people in treatment, especially in low- and middle-income countries.

Objectives: We aimed to investigate attitudes towards schizophrenia in a group of Tunisian family medicine residents, and to examine the link between these attitudes and help-seeking intentions in this group.

Methods: This was a cross-sectional survey. A 18-item questionnaire concerning attitudes toward schizophrenia was used.

Results: A total of 88% participants have reported favorable help-seeking intentions. In total, 48.4% of residents would oppose if one of their relatives would like to marry someone who has schizophrenia, and 37.1% of them would not like to have a neighbor with schizophrenia. Only about a half of residents agreed that “schizophrenia has the chance of recovery”, and 68.8% thought that “schizophrenia can be treated”. Pearson correlations found a significant negative relationship between age and social distance in residents ($p < .001$). Year of residency was significantly associated with attitudes toward schizophrenia, with more unfavorable attitudes in third-year residents ($p = .042$). After controlling for potentially confounding socio-demographic variables, help-seeking intentions did not contribute to the prediction of attitudes toward schizophrenia in the residents.

Conclusions: Implementing anti-stigma programs in medical schools may help improve future physicians’ attitudes and prepare them to provide primary mental health care to young help-seekers with psychosis should be given priority attention.

Keywords: attitudes; schizophrénia; Tunisian family medicine residents

EPP0776

Development and testing the effectiveness and feasibility of a structured violence risk management intervention to support safety in psychiatric hospitals

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Introduction: This presentation focuses on two major problems in psychiatric hospital care: patient violence and lack of patient engagement. Interventions already exist for managing patient violence. However, the challenge in using these interventions is poor integration to clinical practice and these methods do not entail elements of patient engagement.

Objectives: The aim of the presentation is to give an overview of a project aiming to develop and test new structured intervention for violence risk management. Intervention aims to increase safety in care environments and engagement of patients.

Methods: Intervention Mapping protocol together with staff and patients will be used in the project. Quasi-experimental design is used to test the intervention in 4 month period in two psychiatric hospital units.

Results: By the end of the year 2020, development of the the new violence risk management intervention is nearly finished. The presentation will give an outline of the developed intervention and how staff and patient engagement in the development phases were ensured.

Conclusions: The project described in this presentation is an example how a feasible violence risk management method can be developed together with staff and patients receiving psychiatric care. By ensuring engagement of the target groups, here staff and patients, it is possible to promote real integration of a new working method to psychiatric inpatient care. This project was funded by the Academy of Finland (316206).

Keywords: risk assessment; violence; Psychiatric hospital; user involvement

Mental health policies

EPP0778

Impact of “national suicide prevention week” on digital awareness of suicide prevention : an insight from google trends

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Introduction: Every year in the month of September, National Suicide Prevention Week is celebrated. The goal of suicide prevention week is to inform the public about suicide prevention, primarily the warning signs of suicide. However, the impact of this month on the general population is unknown. The Google trends show how frequent web searches have been performed for a particular search-term, which provide an approximation of the people's interest.

Objectives: To evaluate public interest in suicide prevention by analyzing the google trends of “Suicide Prevention” search-term.

Methods: We estimated the interest in such topics by running the google trends data of the last decade by using the filter [Search Term: “Suicide Prevention”, Locations: “United States” and Time Ranges “ 2010 to 2020”].

Results: During this specific interval, people have searched “Suicide Prevention” most frequently during the month of September (month of National Suicide Prevention week). Conversely, in the other months, interest in “suicide prevention” fluctuated between little to none. The only other time people have shown interest in Suicide prevention, other than the month of September, was with suicide news in the media, such as the death of a celebrity by suicide, or suicide-related TV shows. [Figure]



Conclusions: Although it is not definitive, it gives some idea that National Suicide Prevention week has a considerable impact on population interest. Since we did not observe sufficient public

interest in other months, there should be frequent and systematic efforts to spread suicide prevention awareness among the general population.

Keywords: Mental Health Policy; Suicide; Suicide prevention; Mental Health awareness

EPP0779

Characterization of compulsory hospitalization in the psychiatry department of Faro

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Introduction: The mental health law is not universal. In Portugal the urgent compulsory regimen is based on the principles of the presence of severe mental anomaly and risk to themselves or others.

Objectives: Characterization of patients admitted in compulsory hospitalization (CH) between 2018 and 2020, in the University Hospital Center of Algarve - Faro Department

Methods: Retrospective study from January/2018 to August/2020. Social, demographic, epidemiological and clinical data were evaluated.

Results: Of 1191 patients who were admitted 36% occurred in CH. There was a predominance in male sex (58%), the average age was 43 years old. For 62% it wasn't the first hospitalization and 58% had a recent prescription. Admission occurred most frequently because of the presence of psychotic symptoms (figure1) and according to the international classification of disease (ICD10) the most frequent diagnosis was unspecified nonorganic psychosis (figure2). At discharge 59% of the patients remained on compulsory treatment (CT), where the most frequent diagnosis was schizophrenia. Although most of these patients were discharged with oral and long-term injectable antipsychotics, there were higher rates of readmissions when compared to non-CT group, were the most frequent diagnosis was mental and behavioural disorders due to psychoactive substance use and most of the patients were discharged only with oral therapy.

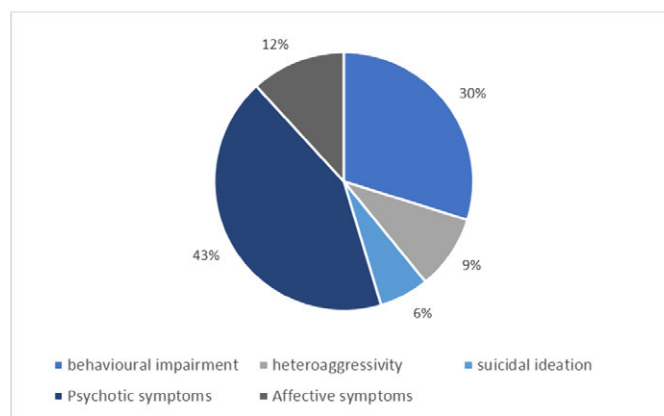


Figure1: Admission symptom to Compulsory Hospitalization