

Data collected included the start date of treatment, BMI measurements before and after treatment.

Results: Among the 220 patients studied, 150 (67.7%) experienced weight gain, while 70 (31.8%) lost weight. The average treatment duration was 11.5 years. Weight gain was more prevalent among males (71.6%) compared to females (66.7%). Patients who gained weight were, on average, prescribed cumulatively more psychotropic medications (3.21) than those who lost weight (2.89).

Conclusions: Shared decision making and acknowledgement of the metabolic consequences of these medications at the point of initiation, and identification of pre-existent metabolic risks, monitor weight gain, and ensure adequate life-style changes to mitigate side effects. These methods should continue throughout the duration of treatment, and when possible, the option of deprescribing should always be available to the patient. It is time care bundles for patients with mental health illness are resourced for primary care.

Disclosure of Interest: None Declared

Rehabilitation and Psychoeducation

EPV1705

Improving Cognition in Severe Mental Illness by Combining Cognitive Remediation and Transcranial Direct Current Stimulation: Study Protocol for a Pragmatic Randomized Sham-Controlled Multi-Center Trial (HEADDSET+)

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doi: 10.1192/j.eurpsy.2025.2167

Introduction: Individuals with severe mental illness (SMI) frequently experience challenges in daily life, often attributable to cognitive impairments. Cognitive rehabilitation interventions can be implemented to enhance thinking abilities and improve functional outcomes. Transcranial direct current stimulation (tDCS) is a non-invasive brain stimulation technique that may promote neural plasticity and therefore, may enhance learning.

Objectives: This trial aims to determine whether individuals with SMI who need supported housing can improve cognitive and daily functioning after following cognitive remediation (CR). Next, this trial evaluates whether CR combined with tDCS will enhance the effect of CR alone. Lastly, this trial will investigate the subjective experience of the CR intervention. We expect that participants will improve in goal attainment and cognitive and daily functioning.

Methods: In this pragmatic, triple-blinded, randomized, sham-controlled multi-center trial, we will compare the experimental group (CR + active tDCS) with the control group (CR + sham tDCS). 126 participants with SMI will receive 16-20 weeks of twice-weekly CR (32-40 sessions of 30-45 minutes) combined with active (N = 63) or sham tDCS (N = 63), separated over five cohorts. We will recruit participants aged between 18 and 65 with SMI residing in supported living facilities. Functional, cognitive, and clinical outcome assessments will be performed at baseline, post-16-week

waiting period, post-treatment, and 6-month post-treatment. Additionally, post-treatment participants will be asked to engage in an in-depth interview to evaluate their meta-cognitive skills and subjective experience of the treatment.

Results: Preliminary results from the post-treatment effects, along with insights from in-depth interviews conducted in the first cohort (N = 15) as well as post-16-week waiting period effects for goal attainment (including the second cohort, N ≈ 40) will be presented.

Conclusions: This randomized controlled trial will investigate the efficacy of CR and tDCS in enhancing recovery in people with SMI. If the intervention proves to be effective, it has the potential to be implemented into standard care for service users requiring long-term support.

Disclosure of Interest: None Declared

EPV1706

The efficacy of LIFESTYLE behavioral intervention in improving healthy eating and reducing alcohol consumption in patients with severe mental disorder: one year of follow-up

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doi: 10.1192/j.eurpsy.2025.2168

Introduction: Patients with severe mental disorders (SMD) often report unhealthy dietary patterns, including low intake of fruits and fiber, high consumption of junk food, and alcohol misuse, leading to poor nutritional status and increased oxidative stress, which negatively impacts physical and mental health. Psychoeducational interventions focusing on dietary habits and alcohol consumption have shown promising results, but long-term data is currently scarce.

Objectives: The main objective was to evaluate the LIFESTYLE intervention's one-year effectiveness in helping individuals with SMD improve their eating habits. Secondary objectives included evaluating the impact of psychiatric symptoms on lifestyle behaviors and the reduction of alcohol consumption.

Methods: The study included 401 patients with SMD from 7 university centres in Italy. Participants were randomized to either the control group, which received general health education, or the experimental group, which received a 5-month psychoeducational intervention. The intervention featured group sessions focused on diet, physical activity, and behavior modification. Univariate analysis was performed to investigate the correlation between psychiatric symptoms and changes in lifestyle behaviours, such as eating habits, physical activity, and alcohol consumption.

Results: Univariate analysis showed significant improvements in lifestyle behaviors among the experimental group. There was an increase in fish consumption (OR: 1.67, 95% CI: 1.45-1.97; $p < 0.05$), fresh fruit intake (OR: 1.36, 95% CI: 0.80-2.31; $p < 0.05$), and vegetable consumption (OR: 1.91, 95% CI: 1.56-1.96; $p < 0.05$). Moreover, there was a reduction in junk food consumption (OR: 0.814, 95% CI: 0.53-1.25; $p < 0.05$) and daily alcohol intake (OR: 0.70, 95% CI: 0.42-1.15; $p < 0.05$).

Conclusions: The results of this study support the efficacy of structured lifestyle intervention for enhancing physical activity and eating behaviors in patients with severe mental disorders. They also support the translation of similar interventions into clinical practice and illustrate the necessity of physical activity

and dietary advice in patients with SMD as part of their treatment schedule. Psychoeducational interventions can greatly improve the long-term health outcomes for those with SMD.

Disclosure of Interest: None Declared

EPV1710

Work Performance Challenges and Needs of Adults with ADHD: Exploring Lived Experiences

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doi: 10.1192/j.eurpsy.2025.2169

Introduction: Attention-deficit hyperactivity disorder (ADHD) significantly impacts adults' work performance, yet their lived experiences and perceptions of their work challenges remain under-explored. Understanding these subjective viewpoints is crucial for capturing the complexities of this population's daily work challenges and needs, serving as a foundational step in developing targeted intervention to enhance work performance and participation.

Objectives: This study aimed to explore the work performance experiences, challenges, and needs of adults with ADHD.

Methods: Twelve adults (ages 20-46) diagnosed with ADHD participated in three separate online focus groups, each comprising four participants.

Results: Participants reported key challenges in executive functions, including difficulties with time management (lateness, missing deadlines), planning (prioritizing tasks, multitasking), working memory (forgetting instructions and names), maintaining focus, managing distractions, and emotional regulation (struggles in relationships with colleagues and employers). These challenges often led to frustration, stress, and low occupational self-efficacy. Identified needs included psychoeducation, self-regulation strategies, work and environment accommodations, and personalized interventions.

Conclusions: The study highlights the unique executive challenges and emotional consequences faced by working adults with ADHD. Hence, it emphasizes the need for personalized interventions to enhance work performance, participation, and overall well-being in this population.

Disclosure of Interest: None Declared

EPV1711

The comparison of labor work training performances for the patients with mental illness in a public psychiatric center

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doi: 10.1192/j.eurpsy.2025.2170

Introduction: Mental illness is a kind of change in mental health status which affected thought, feeling, emotion, behaviors, and so on. Labor work training is one of common rehabilitation programs in psychiatric medical institutes in Taiwan. This rehabilitation program has been implemented for many years, being an important

indicator of psychiatric hospital accreditation. However, we couldn't analysis and apply effectively.

Objectives: We aim to investigate different labor work training performances of the patients with mental illness in a public psychiatric center in Taipei City. Furthermore, we can apply in shared decision making and modifying the labor work training project according to the data results.

Methods: In this cross-sectional study, 89 participants with mental illness who were stably engaged in labor work training for at least 1 month were included in Taipei City Hospital Songde Branch. Descriptive statistics will be used in characteristic of population, incentive record and score of the comprehensive occupational therapy evaluation scale (COTES). We used one-way ANOVA to test the difference of work behavior scores in different labor work training.

Results: This study results showed that the percentage of participants in the cleaning labor group, manual group, and sales & delivery group were 15% (N=13), 49% (N=44), and 36% (N=32) respectively. The most people engaged in the manual group. The average total score of psychiatric patients' work behavior was highest in the sales & delivery group ($p < .05$). There were significant differences at scores of work behavior items, including motivation ($p = .006$), duration ($p = .001$), responsibility ($p = .002$), comprehension ($p = .002$), technique ($p = .005$), and fine motor coordination ($p = .005$).

Image 1:

Table 1 The work behavior mean scores for cleaning labor group, manual group, and sales & delivery group.

items	cleaning labor group	manual group	sales & delivery group	F	p
Motivation	3.27±1.18	3.43±0.94	4.03±0.67	5.373	.006*
Duration	3.62±0.87	3.16±1.01	4.02±0.85	7.829	.001*
Responsibility	3.54±0.66	3.34±0.77	3.92±0.57	6.637	.002*
Frustration tolerance	3.08±1.04	3.25±0.72	3.53±0.76	1.949	.149
Self-expectation	3.00±0.58	3.11±0.55	3.38±0.60	2.803	.066
Comprehension	3.04±0.85	2.90±0.75	3.52±0.63	6.870	.002*
Technique	2.69±0.72	2.77±0.80	3.31±0.72	5.616	.005*
Fine motor coordination	2.54±0.97	2.05±1.07	2.84±0.99	5.717	.005*
Total score	24.77±4.86	24.01±4.78	28.55±4.26	9.305	.000*

Image 2:

Table 2 Demographic characteristics.

	Cleaning labor group	Manual group	Sales & delivery group
People (percentage)	13 (15%)	44 (49%)	32 (36%)
Gender			
Male	9	24	16
Female	4	20	16
Diagnosis			
F20	13	42	31
F31	0	1	1
Other	0	1	0
Education (years)	11.31±2.81	10.91±3.72	12.75±2.72
Course of disease (years)	31.36±10.28	25.45±9.26	23.44±9.59
Age (years)	54.38±6.67	49.80±8.48	48.91±8.69
20-29	0	1	0
30-39	0	5	7
40-49	4	9	9
50-59	5	28	12
60-65	4	1	4
Marital			
Single	9	31	28
status			
Married	2	4	1
Divorced	2	7	3
Others	0	2	0
Content of work training	Cleaning, laundry, meal delivery, etc.	Agriculture, craft, manual processing, broadcasting.	Ward assistant, internship of convenience store