

Conclusions: Slow titration with vortioxetine oral drop solution was associated with a very low percentage of patients reporting side effects in general, and nausea in particular, and with a relatively rapid improvement in depressive symptoms.

Disclosure of Interest: None Declared

EPP0646

Unipolar and Bipolar Depressed Inpatients: correlations with Vitamin D and Cognitive Symptoms

I. Bonfitto¹, G. Moniello², G. Francavilla¹, A. Bellomo³ and S. Dimalta^{1*}

¹Department of Mental Health, ASL FG, Foggia; ²Department of Geriatric Medicine and Gerontology, ASL CE, Caserta and ³Department of Clinical and Experimental Medicine, University of Foggia, Foggia, Italy

*Corresponding author.

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Introduction: Cognitive symptoms are the main factor of discomfort in depressed patients, persisting even during clinical remission (Conradi et al. *Psychol Med* 2011;41:1165-74) and inevitably compromising their quality of life (Fehnel et al. *CNS Spectr* 2013;25:1-10). Several studies have suggested the neuro-protective role of vitamin D, both through actions on the genome and rapid non-genomic mechanisms; so, low serum vitamin D levels are related to poorer cognitive performance (Goodwill et al. *JAGS* 2017;2:1-8), depressive disorders (Kjærgaard et al. *Psych Res* 2011;190:221-225) and suicide risk (Umhau et al. *PLoS One* 2013;8:e51543).

Objectives: to investigate relationships between serum vitamin D levels, depressive symptoms and cognitive performance in unipolar and bipolar depressed adults hospitalized for Major Depressive Episode (MDE).

Methods: 80 patients (34 M and 46 F; average age 48,96 ± 14,17 years; 40% with bipolar depression) were examined. Depression was investigated using Hamilton Rating Scale for Depression (HAM-D), while cognitive functions were explored by: Rey Auditory Verbal Learning Test (RAVLT) and Rey-Osterrieth Complex Figure (ROCF) to assess verbal and visuospatial memory, respectively; Trail Making Test (TMT) and Stroop Color and Word Test to assess attention, spatial planning and cognitive flexibility. Venous blood sampling was used to determine serum Vitamin D levels (average level 15,67 ± 8,7 ng/ml).

Results: At first, the serum level of vitamin D was found to be inversely correlated with HAM-D scores ($p=0,0079$), so that lower concentrations of vitamin D is related to greater severity of depression. In addition, there were strongly significant positive correlations between low vitamin D levels and poorer RAVLT and ROCF scores and strongly significant negative correlations between vitamin serum level and higher scores in TMT and STROOP test, so that calcidiol deficit is associated with poor cognitive performance. Similarly, patients with higher HAM-D scores were found to have a greater cognitive impairment (lower RAVLT e ROCF scores and higher TMT e STROOP scores).

Conclusions: In accordance with previous works, our study supports the close relationship between serum vitamin D levels and

depressive morbidity. During MDE hypovitaminosis D is related to worse disease indices, such as severity of affective symptoms and cognitive impairment, without substantial differences between clinical manifestations of unipolar and bipolar depression, both in terms of affective and cognitive symptoms and disease severity. Considering that cognitive deficits are truly disabling because they may resist to common antidepressant treatments and, as a result, persist during stages of clinical remission, vitamin d supplementation, by minimizing cognitive dysfunction, could be a good strategy to reduce the risk of relapses and to improve patients' functioning and quality of life.

Disclosure of Interest: None Declared

E-mental Health

EPV0427

Evaluation of User Satisfaction in a Supportive Text Message Program for Public Safety Personnel

G. Obuobi-Donkor^{1*}, R. Shalaby², B. Agyapong², R. D. L. Dias¹ and V. I. O. Agyapong^{1,2}

¹Department of Psychiatry, Dalhousie University, Halifax and

²Department of Psychiatry, University of Alberta, Edmonton, Canada

*Corresponding author.

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Introduction: Public safety personnel (PSP) encounter traumatic events in their workplace, elevating the likelihood of mental health issues. Delivering efficient, evidence-backed interventions, like supportive SMS text messaging programs, can significantly enhance PSPs' mental well-being, garnering high user satisfaction rates.

Objectives: This study evaluates users' satisfaction, receptiveness, and perceptions of the supportive SMS text messaging intervention (Text4PTSI).

Methods: Participants enrolled in the Text4PTSI program and received one-way cognitive behavioural-based supportive text messages for six months. They participated in a web-based survey delivered through SMS text messages at enrollment, six weeks, three months, and six months after enrollment. The participants' perceptions and receptiveness of the program were evaluated through a 5-point Likert scale. Data were represented as categorical variables, and overall satisfaction with the Text4PTSI program was assessed on a scale ranging from 0 to 100.

Results: Of the 131 Text4PTSI program subscribers, 81 participants responded to the survey, yielding 100 responses across the three follow-up time points. The average satisfaction score was 85.12 (SD 13.35). A significant portion of respondents, constituting 79%, agreed or strongly agreed that Text4PTSI helped them manage anxiety. Additionally, 72% reported relief from depressive symptoms, and 54% (54 out of 100 responses) felt less lonely. Moreover, the majority (84%) of participants expressed that Text4PTSI connected them to a support system, improving their mental well-being, felt more hopeful about managing concerns about their mental health or substance use (82%), and helped enhance their overall quality of life (77%). The data also revealed that most participants consistently read the supportive text messages (84 out of 100 responses, 84%), took time to

contemplate each message (75 out of 100 responses, 75%), and revisited the messages more than once (76 out of 100 responses, 76%).

Conclusions: PSP participating in the 6-month Text4PTSI intervention expressed significant satisfaction and gratitude in the follow-up surveys. Their positive feedback indicates a promising path towards increased service utilization, potentially enhancing its effectiveness and impact on end users.

Disclosure of Interest: None Declared

EPV0428

Characterize and Address Mental health Problems in University Students (CAMPUS Study): preliminary results

M. Nosè*, G. Muriago, F. Tedeschi, G. Turrini and C. Barbui

Department of Neuroscience, Biomedicine and Movement Sciences, Section of Psychiatry, University of Verona, Verona, Italy

*Corresponding author.

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Introduction: The transition phase from late adolescence to early adulthood, which corresponds with the period of university life, is a time that offers important opportunities for personal growth. However, this developmental phase also concurs with the peak period of risk for the onset of mental health disorders. For this reason, the literature clearly identifies university students as a vulnerable population group for psychological distress and mental problems. Digital psychological interventions and e-mental health solutions are emerging as a promising solution for university students, particularly appealing due to their anonymity, portability and ease of access. Hence, the World Health Organisation has developed several psychosocial e-mental health tools including Doing What Matters in Times of Stress (DWM), which has been consistently shown effective in various vulnerable populations. These data provide the framework for the CAMPUS study that is intended for students attending the University of Verona.

Objectives: The main objective of this project is to adapt the WHO psychological intervention called “Doing What Matters in Times of Stress” (DWM) to this target population and to evaluate the effectiveness, feasibility, and acceptability of WHO’s DWM as a psychological strategy for effective mental health prevention and promotion, and for reducing psychological symptoms and distress in university students. Secondary objectives of the project include to evaluate the fidelity of DWM, to assess factors associated with its implementation and effectiveness and to co-create the necessary local conditions for implementation and up-scaling of DWM.

Methods: The CAMPUS study is a prospective non-randomized follow-up study. The target population is composed by university students of University of Verona, Italy. The online assessments, which are collected pre and post intervention, consist of an ad-hoc sociodemographic information page, and four self-administered questionnaires assessing psychological distress, depression and anxiety symptoms, and psychological well-being. In addition, implementation checklists will be administered to assess the acceptability, appropriateness and feasibility of the intervention.

Results: Preliminary results on a sample of 300 students attending University of Verona show that the adapted DWM intervention promote students’ psychological well-being and reduce the level of psychological distress as well as the risk for the later development of a psychopathology. Moreover we expect that future results would include data on the effectiveness, feasibility, and acceptability of the adapted DWM intervention among university students

Conclusions: These results provide valuable information for mental health promotion and support programs for university students, as well as insights into factors influencing its implementation and suggestions for future scaling of the intervention.

Disclosure of Interest: None Declared

EPV0429

The population-based Tromsø 8 study and e-mental health

R. Wynn^{1,2*}, G. Bellika¹, L. G. Fernandez³ and V. T. Salcedo⁴

¹Clinical Medicine, UiT The Arctic University of Norway, Tromsø;

²Department of Education, ICT and Learning, Østfold University College, Halden, Norway; ³Clinical Medicine, University Miguel Hernandez, Alicante and ⁴ITACA, UPV, Valencia, Spain

*Corresponding author.

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Introduction: Ageing populations with increased needs, rising costs of traditional services, and new technologies are some factors driving the use of e-health services. A Norwegian study with data from 2015-2016 found that 13.5% had used apps, 7.3% had used social media, and 5% had used video services for health purposes. Little is known about the effects of many online health services, but in general they seem to increase knowledge and make most people feel reassured, although some users feel more anxious or confused after using such tools. Recent technological developments have resulted in new online health services, including AI-based technologies. More updated knowledge regarding the population’s use of e-health services in general and e-mental health services in particular, is needed.

Objectives: The objective here is to provide information about an upcoming large population-based epidemiological study and how it addresses e-health and e-mental health.

Methods: We introduce the upcoming 8th version of the epidemiological Tromsø Study and discuss its importance to the field of e-mental health.

Results: The Tromsø epidemiological study has since 1974 taken place in the Norwegian municipality of Tromsø. It contains information on a range of topics within health and illness, including topics from many medical specialties, psychiatry and substance use. In the upcoming 8th version of the study (2025-2026), more than 33,000 people aged above 40 will be invited to participate. The main questionnaire will include questions relating to a wide variety of topics, including on e-health use. We suspect the importance of e-health and e-mental health have increased lately, and we will examine how the use of e-health may impact mental health.

Conclusions: Community-based studies, such as the Tromsø Study, allow researchers to study associations between many different variables, including mental health and e-health. The upcoming Tromsø 8 study will enable us to study e-health use and its