

Objectives: The aim of the study is to compare face-to-face visits with a psychiatrist with outpatient visits by telephone in terms of changes in the treatment applied by psychiatrists.

Methods: The frequency of introducing changes in the current pharmacological treatment of patients was compared. Face-to-face visits to the outpatient clinic and visits where psychiatrists contacted patients via telephone were analyzed. Treatment change was defined as a reduction or increase in drug dose, drug discontinuation or the initiation of a new drug by a psychiatrist.

Results: We assumed that visits without non-verbal contact do not provide as much information as direct visits. Consequently, patients who are often negative about the need to take medications over the phone will present themselves better to psychiatrists, thus the change in treatment will be used less frequently in this group. The results will be presented at the conference.

Conclusions: Currently, various forms of psychiatric care are evolving to adapt to new needs. We should also be aware of the consequences of these changes.

Disclosure: No significant relationships.

Keywords: e-mental health; telepsychiatry

EPV0667

Digital universal parent training program to promote positive parenting skills – A randomized waiting-list study

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Introduction: Parent training programs have high potential to promote positive parent-child relationships as well as reach and engage parents to participate. Digitally delivered programs may overcome the barriers associated with face-to-face interventions, such as stigma, logistic challenges and limited resources.

Objectives: To assess the effectiveness and feasibility of digital universal parent training program for families with 3 years-old children, focusing on parenting skills and child's behavior.

Methods: A non-blinded randomized controlled trial (RCT) with two groups: (I) the intervention group, in which participants receive the parent training and (II) the waiting list group, in which participants are placed on a waiting list to receive the parent training intervention after the first follow-up measurement have been completed. Participants must meet the following inclusion criteria: a) guardians having a child age 3 years, b) participating to annual health checkup in child health clinic, c) at least one of the guardian is able to understand the languages that intervention is provided.

Results: Pilot study with feasibility assessment finished at early 2021. Recruitment of the wider RCT study is currently ongoing. The results from the pilot study and more detailed description about the intervention will be presented.

Conclusions: This study with good national geographical coverage is a unique possibility to evaluate universal parenting program on promoting parenting behaviors associated with the promotion of optimal child emotional development. This study also provides population level information about parenting skills and child's behavior.

Disclosure: No significant relationships.

Keywords: RCT; Child mental health; Digital intervention; Parent training

EPV0668

Mental health and life satisfaction among nurses: a cross-sectional study

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Introduction: Nursing is highly demanding and stressful profession. Therefore, maintaining and improving psychological well-being among nurses seems essential to have a better life satisfaction and a better productivity.

Objectives: The aim of this study was to assess the relationship between mental health and life satisfaction among nurses.

Methods: The study was conducted in a group of active nurses from Hedi Chaker hospital in Sfax- Tunisia. Standardized questionnaires were used, including the general health questionnaire (GHQ-28) and the satisfaction with life scale (SWLS).

Results: A total of 100 (males = 40; females = 60) nurses participated in this study. The mean age was 50.20 ± 7.20 years. The average of job tenure was 25.25 ± 9.70 years. The majority of participants (66.7%) reported having chronic diseases. Rotating shifts work was noted in 72.50% of cases. Average scores for the GHQ-28 and the SWLS were respectively 30.66 ± 11.07 and 21.61 ± 6.23. The presence of chronic conditions was associated with psychological distress (higher GHQ-28 scores) (p = 0.01). Life satisfaction score was positively correlated with age (r = 0.29, p = 0.023), whereas it was negatively correlated with GHQ-28 scores (r = -0.36, p = 0.01). Low life satisfaction (SWLS scores between 5 and 14) was significantly associated with three domains of the GHQ-28: somatic symptoms (p = 0.008), anxiety (p = 0.001) and social dysfunction (p = 0.01).

Conclusions: According to our study, low life satisfaction was associated with psychological disorder. Hence, nurses need support and subsequent interventions in order to improve psychological wellbeing and life-satisfaction.

Disclosure: No significant relationships.

Keywords: Nurses; general health; life satisfaction; mental health

EPV0670

Digital Psychiatry in the COVID-19 Era: the First Italian Cross-National Survey

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Introduction: The COVID-19 pandemic led to the implementation of digital psychiatry (DP) in everyday clinical practice, resulting in the need for a skilled healthcare workforce.

Objectives: Our purpose was to investigate the level of training, knowledge and expertise of young mental health professionals and medical students in DP, as well as exploring their beliefs and experiences in this field.

Methods: An *ad hoc* cross-sectional survey was designed and administered to Italian medical students, psychiatry trainees, and early career psychiatrists.

Results: Most of the sample declared that the topic of DP was never discussed within their academic training (89.1%), mainly revealing an overall lack of knowledge on DP. Nevertheless, they mostly declared that DP represents a valuable therapeutic tool in mental health (80%) and that the academic background should include a dedicated course/module (54.4%). Moreover, most subjects declared that DP is less effective than in-person interventions (73.2%), despite the emerging evidence that being trained in DP is significantly associated with the belief that digital and in-person interventions are comparable in their effectiveness ($p \leq 0.05$).

Conclusions: During the current pandemic, DP represented an ideal response to the need for physical distancing by ensuring the advantage of greater access to care. However, DP interventions are still uncommon, and there remains a certain resistance to their use in mental health care. The lack of formal training during the academic training could be a limiting factor. Therefore, addressing these issues in academic settings could be crucial to spreading this innovative practice also in the post-COVID-19 era.

Disclosure: No significant relationships.

Keywords: digital psychiatry; telepsychiatry; psychiatry training; education

EPV0673

Zooming in on Agoraphobic Behaviors: a Case Study

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Introduction: The COVID-19 pandemic brought many new challenges that people had to overcome with ingenuity. However, many patients already suffering with psychiatric diseases saw their access to conventional health care limited, aggravating their statuses. E-Medicine is the branch of health care that provides access through the Internet, and it has been growing in the last few years. During the COVID-19 pandemic, many health care workers shifted towards E-Medicine, aiming to provide support to patients, especially with the social distance policies that were implemented worldwide.

Objectives: Provide an example of how e-Medicine can be a tool in establishing a therapeutic alliance, and patient follow-up

Methods: Case report with a brief literature review on the subject

Results: RG is a 19-year-old female that contacts her family doctor through e-mail, expressing concerns over not being able to leave her house for over a year, also manifesting anxiety and depressed humor. This started in April 2020 and was slowly worsening

throughout the year, culminating in a panic attack. RG started counselling and follow-up appointments via Internet and started treatment with vortioxetine. Three months later, improvements were stated, namely decreased anxiety, better sleep patterns, and leaving the house for small periods.

Conclusions: Without E-Medicine, RG wouldn't be as able to reach out to her family doctor, and follow-up would be much more arduous since the patient avoided leaving her house, and telephone appointments lack the visual aspect of the clinical interview. E-Medicine is a valid alternative to conventional Medicine, providing a safe environment for patients concerned with public space.

Disclosure: No significant relationships.

Keywords: Depression; agoraphobia; e-medicine; pandemic

EPV0675

Developing A Smartphone-Based Application for the Behavioral Cognitive Therapy of Panic Disorder

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Introduction: Even though cognitive behavior therapy is proven to be an effective treatment for panic disorder, the scarcity of psychiatrists cause many patients not to get a sufficient therapy. E-mental health applications are being developed to address this shortage, especially after the COVID-19 pandemic. However, none of the e-mental health applications developed so far has offered a structured cognitive behavioral therapy.

Objectives: We are developing a mobile application which will integrate with psychiatric interventions that aims to make cognitive behavioral therapy more accessible.

Methods: Our algorithm consists of multiple choice questions and answers to determine the progression of the algorithm. The first three sessions consist of psycho-education of the application and the cognitive therapy model of panic mostly. During the psycho-education sessions, patients' symptoms during panic attacks and their catastrophic thoughts will be questioned to be used in following sessions. After the panic log has been introduced in the third session, patients will enter the details of their panic attacks right after they experience it and this information will be investigated in the following sessions. Progress for the cognitive restructuring will be monitored as the sessions proceed. Later session will also include in-session symptom induction exercises.

Results: We are still on the development phase of the mobile application. Hence we do not have any data to present at the moment.

Conclusions: Our main purpose is to develop a mobile application which will integrate with structured cognitive behavioral therapy process, reduce the workload of the therapist and is easily accessible through the smart phones.

Disclosure: No significant relationships.

Keywords: e-mental health; panic disorder; mobile application