

Abstract: Introduction: The media portrayal of mental health is relevant in shaping the population's attitudes towards mental disorders. However, there is little information about the representation of children and adolescent mental health in the Spanish press, especially in the context of the COVID-19 pandemic. The general objective of this study was to analyze the tone and content of Spanish newspaper articles about mental disorders in youth during the COVID-19 pandemic.

Method: We collected media articles from 10 news sources, comprising the digital editions of five online news websites and five printed newspapers over a 6 month period (January 2021-June 2021). These articles were coded for content using a standardized codebook, followed by a qualitative thematic analysis. A total of 205 news items were evaluated.

Results: Results showed that the majority of the news items had an overall positive tone (68.3%), only 5.4% were stigmatizing and only 7.3% were related to violence. However, few articles offered help seeking information (6%), adolescents were rarely quoted (14%) and children were never quoted. Substantial differences are described in terms of age, gender and disorder, with adolescents, males and patients with psychosis or behavioral disorders most associated with stigmatizing content or violence. The thematic analysis led to three emergent themes: (i) violence and victimization; (ii) the COVID-19 pandemic; and (iii) technology and social media. The number of articles that described young people with mental health problems as victims of violence was prominent.

Conclusions: The Spanish media generally does not stigmatize mental health problems in children and adolescents. Furthermore, the COVID-19 pandemic may have promoted more positive discussion about youth mental health. However, there remains some room for improvement, as patients are seldom quoted, very few articles offer help-seeking information, and a narrative of victimization without appropriate discussion of resilience regularly occurs.

Disclosure of Interest: None Declared

S0058

UEMS training requirements for the speciality of psychiatry: knowledge, skills and professionalism required for the care of refugees and asylum seekers

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Abstract: The UEMS (or European Union of Medical Specialists) is a non-governmental organisation representing 40 national associations of medical specialists and operating through 43 Specialist Sections. The Psychiatry Section's purpose is to promote the highest standard of care for people who are affected by mental health problems in Europe through postgraduate training and continuing medical education of psychiatrists. It is responsible for developing the European Training Requirements (ETR) for the Speciality of Psychiatry through an iterative process that involved consulting national psychiatric associations, trainees, patient and carer organisations, EPA and WPA. Because medical education and the practice of psychiatry are continually evolving, it is intended that the ETR will be seen as a living document that will be periodically reviewed and amended.

In 2016, the Section approved an Annex to the competency framework covering learning outcomes of knowledge, skills and professionalism required for the care of refugees and asylum seekers. Last year, the Section undertook a major update and revision of the ETR and these learning outcomes have now been fully incorporated.

In this presentation, I am going to outline the specific requirements related to the care of refugees and asylum seekers. They relate to knowledge of traumatic stress, transcultural psychiatry and health promotion and social inclusion; intercultural communication skills, detailed history taking with reference to the impact of adverse events and psychoeducational skills; and professionalism, including awareness of own world view, respecting culture, ethnic and religious difference.

Disclosure of Interest: None Declared

S0059

How to include patients' perspectives in cognitive effects?

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Abstract: Cognitive (dys)function after ECT is often considered as a homogeneous phenomenon across patients. However, there are important inter-individual differences, with some patients experiencing residual invalidating cognitive deficits. We present the results of a study combining both group-level and individual-level analyses of cognitive function using an extensive cognitive test battery that was assessed in 73 patients at 5 time points during their ECT care pathway. Furthermore, we explored the presence of distinct subgroups of patients with a similar cognitive trajectory over time after treatment with ECT using Latent Class Growth Analysis.

Disclosure of Interest: None Declared

S0060

Presentation of Trauma Disorder in Adults with Intellectual Disability

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Abstract: Background: In the 20 years since a review by McCarthy (2001) on the presentation of Post-traumatic stress disorder (PTSD) in people with intellectual disability (ID), the understanding of trauma disorder has increased.

Method & Findings: Diagnostic criteria for ID will be presented to set the context. A brief summary of the key literature over the past twenty years will be discussed focusing on the presentation of PTSD in people with ID including the use of ICD-11 criteria. Evaluated tools available to assess the impact of life events and trauma for use in people with ID will be outlined including treatment options. The presentation of trauma disorder will be illustrated through a case study.

Conclusion: Psychiatrists need to be aware that a history of trauma may be an underlying factor in the presentation of people with ID to psychiatric services.

Reference: McCarthy J (2001). Post-traumatic Stress Disorder in People with Learning Disability. *Advances in Psychiatric Treatment*; 7, pp. 163-169.

Disclosure of Interest: None Declared

S0061

New research on media coverage of mental illness and suicide: implications for stigma, suicide mortality and social inclusion.

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Abstract: Introduction: The Werther effect is a phenomenon that has been demonstrated in the media. These media are being replaced by social media, the use of which has increased greatly over the decade especially among young people, allowing content to be streamed instantly and fostering connections around the world. At the same time, there is a deterioration in mental health among young people.

Objectives: To know if there is a Werther effect on social networks, as well as to understand the relationship between this effect and social media. It was also wanted to know if the posts follow the guidelines for dealing with suicide if there are differences between types of social media and if this effect is observed after the death of celebrities.

Methods: A systematic review was performed with analysis, data extraction and synthesis of the structured results following the PRISMA criteria.

Results: 15 articles were included, 11 of which showed Werther effects on social media, while only 4 were unrelated. It was found that most publications did not follow the recommended guidelines. No differences were observed between social media, while a greater effect was observed when it was related to celebrity suicide.

Conclusions: Social media can act as a suicide support network, as it is a space where there is a risk of infection by normalizing suicide and treating it insecurely. However, it has also been shown that it can act as an agent of change and protection, as many public individuals on social media seek help and express their concerns. More studies are needed to know the magnitude of the Werther effect on social media and to know the potential benefits of talking about suicide if it is done safely.

Disclosure of Interest: None Declared

S0062

Cognitive effects after ECT: how to treat them?

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Abstract: How far have we progressed in the field of treating cognitive side effects? Six months after the last ECT treatment, about 15% of patients still have such symptoms, limiting daily life. So far, studies in the field of cognitive training for ECT-related cognitive side effects show few positive effects. Nevertheless, these patients seem to help well. Because they have no structural damage to their brain, training with long-term effectiveness may be available for them. Amsterdam University Medical Centers started the CONNECT clinic (Cognitive and Neuropsychological Aftercare ECT) in early 2022 for diagnosis and treatment of patients with long-term cognitive complaints (longer than six months) that hamper their daily functioning. After the intake and neuropsychological diagnostics, treatment starts if there is an indication. Patients are then offered 'cognitive strategy training' in an individual course. Developed in the field of neuropsychological rehabilitation, these help to get a grip on cognitive complaints by improving memory or executive functioning with learning strategies. Our initial experiences with patients show that patients master these strategies very well and quickly. We present a pilot project from the Amsterdam UMC where an individualized treatment-programme for long-term cognitive complaints after ECT is being implemented and evaluated.

Disclosure of Interest: None Declared

S0063

Challenges in differential diagnosis between autism spectrum disorder and psychotic disorders

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Abstract: Data from literature show that people with Autism Spectrum Disorders (ASD) are more likely to develop a psychosis than the general population. They also have a higher chance of developing schizophrenia than neurotypical controls. In order to diagnose comorbid psychosis in ASD in an adult, first a full psychiatric examination is necessary to decide on the directions of possible further diagnostics and, if necessary, to recommend appropriate additional tests, e.g. psychological tests using professional scales and questionnaires for adults. In the case of diagnostic doubts, there are indications to refer the patient to more specialized centers. Although the two conditions are different, they share some common features, such as social withdrawal and communication disorders. This can lead to problems in the diagnosis of psychosis in people with autism. The basic symptoms of the mentioned diseases usually differ between the two disorders. For this reason, it's important to try to get regular screenings and get care from the right professionals. A case report is presented of a patient, who received a diagnosis of ASD in the childhood, and later as an adult developed psychotic symptoms, which led to a change of diagnosis to schizophrenia.

Disclosure of Interest: None Declared