

experimental treatment strategies, namely those related with neuromodulation, particularly Transcranial Magnetic Stimulation (TMS).

**Conclusions:** Emotional regulation, particularly the processing of negative emotions, appears to be a key element in the neurobiology of AN.

With new neuromodulation techniques, specially TMS, it seems possible to modulate the neuronal circuits inherent to emotional processing, such as the L-DLPFC.

Future randomized clinical trials are needed in order to understand how neuromodulation can contribute to exploring the neurobiology of AN and to become more targeted and effective therapeutic options.

**Disclosure of Interest:** None Declared

## EPP0827

### I-TREAT: Internet-based Cognitive Behavioral Treatment for Other Specified Feeding or Eating Disorders (OSFED) in Danish Adolescents and Adults – Study Protocol for a Randomized Controlled Trial

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**Introduction:** Eating disorders severely impair psychosocial functioning, physical health, and quality of life. In particular, Anorexia Nervosa has the highest mortality rate among all psychiatric diseases. Other Specified Feeding or Eating Disorders have the highest lifetime prevalence with weighted means of 7.64% for women. Eating disorders are considered hard-to-treat, and studies have indicated that people suffering from eating disorders prefer low-threshold interventions compared to traditional mental health care. International studies show promising results of internet-based interventions for Other Specified Feeding or Eating Disorders.

**Objectives:** To test the effectiveness of an internet-based psychologist-guided cognitive behavioral treatment program (I-TREAT) to reduce eating disorder symptoms in Danish adolescents and adults with Other Specified Feeding or Eating Disorders.

**Methods:** This study is a randomized controlled trial with two arms: 1) an intervention group and 2) an active control group. Participants are adolescents from the age of 15 or above, as well as adults, diagnosed with Other Specified Feeding or Eating Disorders. The intervention group receives the I-TREAT program while the control group receives self-guided mindfulness exercises. I-TREAT comprises 12 text-based treatment sessions with psychoeducation and treatment-related tasks, based on cognitive behavioral therapy and elements of compassion-focused therapy. The treatment duration is approximately 12 to 36 weeks. Videos, pictures, and animations support the treatment content and the program is accessible by web-browser and app. A specialist in eating disorders guides the patient through treatment with task-related feedback and asynchronous written communication. Patients will answer questionnaires regarding eating disorder symptoms, quality of life, and motivational states before, during, and after treatment, with follow-up measures at 3, 6, and 12 months. We expect to include

63 patients to each group and commence recruitment in August 2023. Preliminary results from a feasibility study on I-TREAT show good evaluations from clinicians and patients (N=30).

**Results:** No results have yet been obtained. The results will be submitted to international scientific journals and presented at conferences.

**Conclusions:** The internet-based cognitive behavioral treatment program I-TREAT may be a promising tool for effectively treating adolescents and adults with Other Specified Feeding or Eating Disorders in Denmark.

**Disclosure of Interest:** None Declared

## EPP0828

### Anorexia nervosa in adolescence from oral health perspective

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**Introduction:** Management of patients with anorexia nervosa (AN) desires psychiatric/medical care. In average AN disease onset they represent a younger generation than 18 y.o. In this age typically children and adolescents are under regular dental care. Whether young AN patients should be included to intensive oral supervision may be still questionable. In literature little information on changes in oral cavity caused by AN were reported.

**Objectives:** Therefore, the aim of the study was to evaluate caries incidence, tooth wear, gingival inflammation, and oral hygiene level among adolescent AN inpatients, highlighting the aspect of oral health manifestations in case-control study.

**Methods:** Based on clinically confirmed 130 AN restrictive subtype hospitalized female subjects (BMI <15 kg/m<sup>2</sup>, age 14.8±1.8), dental status has been examined regarding the occurrence of caries lesions using *Decay Missing Filling Teeth* (DMFT), erosive wear as *Basic Erosive Wear Examination* (BEWE), gingival condition as *Bleeding on Probing* (BOP) and plaque deposition as *Plaque Control Record* (PCR). The results were compared with age-matched 110 female controls (BMI 19.8±2.3 kg/m<sup>2</sup>, age 15.5±1.8, p=0.744) dentally caried in public University dental clinic (p<0.05) in the same time period.

**Results:** AN patients compared with healthy adolescents were found to present higher incidence of oral-related complications according to dental status (DMFT 3.9±4.5 vs. 2.0±1.8, p=0.005), erosive tooth wear (BEWE 18.9% vs. 2.9%, p<0.001), less efficient in controlling plaque (PCR 43.8% vs. 13.7%, p<0.001) and gingival inflammation (20.0% vs. 3.9%, p<0.001). AN group, a significant correlation between BOP, BEWE, and duration of AN symptoms (p<0.05), similarly to the number of decayed teeth D, filled teeth F and PCR were detected (p<0.05).

**Conclusions:** Although the obtained results did not reveal any severe oral complications, AN diagnosis in adolescence may influence to numerous oral-related symptoms from dental caries, the onset of erosive tooth wear, failure in dental hygiene to be

continued as gingival inflammation. After AN diagnosis a regular preventive intervention should be performed during dental recall sessions. There is a need for professional oral hygiene/diet instructions combined with regular oral check up visits to avoid oral complications and disease progress. For clinical relevance an active collaboration between psychiatric and dental specialists is needed.

**Disclosure of Interest:** None Declared

## E-mental Health 03

### EPP0829

#### Telepsychiatry: the use of technology to improve access to mental health care

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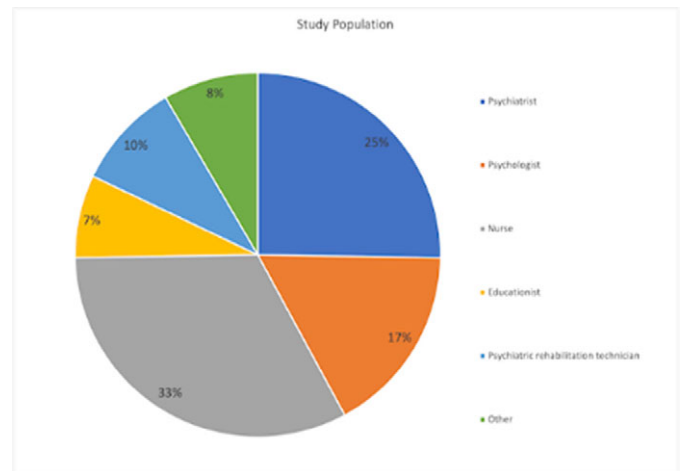
**Introduction:** Telepsychiatry (TP) uses communication technology to provide psychiatric consultation to patients unable to reach consultation services. Due to COVID-19 outbreak, many mental health services implemented TP. The University of Milan developed a patient-specialist video consultation service: the Cure Ospedaliere Domiciliari (Home Hospital Care system; COD20).

**Objectives:** The aim of the study was to assess the digital skills of the mental health professionals and to assess both the confidence and the satisfaction with the COD20 platform, as well as their skills in handling certain degrees of technostress.

**Methods:** Mental health professionals of the outpatient clinics of the department were interviewed through an online anonymous survey. Data collected were sociodemographic, job position, educational level, digital skills, adequacy of devices in the workplace, satisfaction degree, ease of use of the COD20 tool, as well as main technostress score. Data were analyzed using SPSS v.27.

**Results:** Among 95 subjects, more than 95% of the sample is familiar with the use of electronic devices, such as smartphones, tablets, and computers; 93% employs appropriate devices in the workplace. Only 12% had an ECDL certificate, while the majority of the sample (77%) learnt the use of electronic devices independently. The levels of the digital skills were considered intermediate-advanced for communication and information research. Despite all the respondents being aware of the use of COD20, only 50% received adequate training; 77% deemed it worthwhile to attend an individual or a group training (40% vs 43%). Telemedicine was used for clinical interviews by 80% of the sample: 41% of these used Telemedicine at least 10 times/year, 18% between 10 and 20 times/year, and 42% more than 20 times/year. With regard to the appreciation of the COD20 platform, 75% of the sample considered this tool useful, while 61% considered it easy to use. There is a significant correlation between the ease of use and a higher level of education ( $p < 0,00$ ). Among all categories, psychologists were more likely to use the platform compared to other workers ( $p = 0,016$ ). The average score of technostress among operators was  $22.78 \pm 6.84$  (maximum score: 45).

**Image:**



**Image 2:**

