

individuals may be more susceptible to mood switching. Nevertheless, further research is needed to better elucidate variables influencing mood switching during TMS treatment and to develop effective preventative measures, especially for patients already predisposed to manic switching.

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Psychotherapy

EPV0856

Multifamily group evaluation with Score 15 questionnaire

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Introduction: The multifamily group that has been underway since April 2019 in Alcobendas, Madrid is described. A group that serves people diagnosed with mental disorder and their families, with the aim of improving their health and quality of life. It is about facilitating and improving the basic communication of relational aspects and healthy bonds. It is intended to offer a space where you can think together about the experiences lived in your own family with the rest of the group

Objectives: Assess the evolution and improvement of the patient and family members with the Score 15 questionnaire, The Score is a way of giving users a voice about the therapy process, not about the contents of their problems, but about their perception of the effectiveness of therapeutic work and for professionals it is an opportunity to obtain important feedback from their work.

Methods: Using the Score 15 questionnaire on all participants in the group at time zero and after 12 sessions

Results: Improvement in the family description items, and in the quantitative improvement in scoring of the following questions: What degree of severity would indicate? Do you think therapy will be helpful/has it been helpful to you?

Conclusions: Family therapy in the modality of Multifamily Groups provides an improvement in intrafamily communication, its links and therefore in the rest of social communication, facilitating the exit from loneliness and misunderstanding and in turn broadens the understanding and understanding by therapists

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EPV0858

Virtual Reality as Exposure Therapy in the Treatment of Blood-Injection-Injury Phobias

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Introduction: Virtual Reality (VR) is a transformative technology that facilitates the development of immersive virtual environments. Its application is steadily growing within Cognitive Behavioral Therapy (CBT) techniques, notably in virtual exposure therapy. This is particularly evident in the treatment of specific phobias, with a specific focus on addressing blood-injection-injury phobias.

Objectives: The objective of our study is to design a treatment protocol for patients suffering from blood phobia based on VR.

Methods: We used the following scales:

- Fear Survey Schedule-III (FSS-III) and the Injection Phobia Scale (IPS) for psychometric evaluation of the intensity of avoidance fear.
- Questionnaire on cybersickness: to identify potential adverse effects of exposure to virtual reality.

To conduct a functional analysis of phobias, we used the SECCA grid and the SORC grid.

Results: The therapeutic protocol stages of VR for a patient suffering from Blood-Injection-Injury Phobia (BIIP) are as follows:

1. Collection of sociodemographic and clinical data.
2. Functional analysis to identify triggering factors, contributing factors, and consequences of behavior. The SECCA or SORC grid can help in conducting this functional analysis.
3. Psychometric evaluation of the intensity of avoidance fear using the three scales: FSS-III, IPS, and the cybersickness scale.
4. Patient education on the mechanisms of the phobia.
5. Setting of objectives.
6. Therapeutic contract.
7. The Protocol :
8. Cognitive approach: identification of automatic thoughts and replacement with more rational thoughts.
9. Behavioral approach: Progressive exposure, controlled immersion of the patient in virtual environments corresponding to situations that trigger their phobia. This exposure is coupled with relaxation.

The treatment continues with regular follow-up to ensure the consolidation of progress and to adjust strategies.

For relapse prevention, simple measures like personalized exercises to be done by the patient, can favor the long-term maintenance of the acquired skills.

Conclusions: Virtual reality exposure therapies (in virtual) are as effective as in-vivo therapies. Besides, they offer a significant advantage over the latter as they facilitate access to stimuli or anxiety-provoking situations that are difficult to access or control in the real world.

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EPV0859

Optimizing Outpatient Mental Health Services: A REBT-Infused Approach to Empowerment and Well-being

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Introduction: Rational Emotive Behavior Therapy (REBT) fundamentally posits that our thoughts, beliefs, and interpretations exert substantial influence over how we perceive and react to life's occurrences. Central to REBT is the process of recognizing and disputing irrational, self-defeating beliefs, in favor of adopting rational and constructive perspectives.

Objectives: This presentation endeavors to introduce the foundational principles of REBT, elucidate its applied techniques, demonstrate its efficacy through compelling case studies, and delineate its spheres of applicability.

Methods: Case Studies:

1. Overcoming Social Anxiety: Illustrating the transformation from debilitating social anxiety to enhanced social functioning.
2. Managing Work-related Stress: Exemplifying the alleviation of chronic stress in a high-pressure work environment.
3. Overcoming Depression: Demonstrating the journey from persistent despondency to restored vitality and engagement.

Results: In total, REBT furnishes a methodical and pragmatic approach to therapy, affording individuals agency in steering their emotional well-being towards positive and enduring transformation. It is imperative to acknowledge that the suitability of REBT hinges on the idiosyncratic needs, inclinations, and circumstances of each patient.

Conclusions: By internalizing and applying these foundational principles, REBT empowers individuals to identify and dispute irrational beliefs, paving the way for more adaptive emotional responses and an enhanced overall state of mental well-being. It equips individuals with tangible tools to navigate life's challenges with heightened resilience and emotional equilibrium.

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EPV0862

Family systemic therapy in patients with eating disorders

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Introduction: Eating disorders are a group of pathologies in which negative beliefs about food, body type and weight are associated with conducts that include food restriction, binge eating, excessive exercise, induced vomiting and the use of laxatives. They can be really severe, affecting quality of life and lead to multiple physical and psychiatric complications, even with a deadly fate.

Objectives: Presentation of a patient's case with an eating disorder and the intervention with her family, as well as, doing a review of the family interventions in these kinds of patients.

Methods: Presentation of a patient's case and review of existing literature, in regards to the use of family therapy in patients with eating disorders and its effects.

Results: As in the patient's case, there are a lot of studies that support the evidence of improvement using family therapy in patients with eating disorders. However, the difficulty to isolate

the necessary variables in order to do studies about psychological treatments, complicates finding scientific evidence that supports the clinical evidence that we see in our patients day by day with these types of interventions.

Conclusions: There are studies that support the efficacy of these types of family interventions. However, there needs to be a more thorough investigation with the objective of finding the more precise optimal family intervention, and specifically, determining for who and under what conditions, certain types of family interventions would be more effective.

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EPV0863

The association between trajectory of change in social functioning and psychological treatment outcome in university students: a growth mixture model analysis

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Introduction: Attendance at university can result in social support network disruption. This can have a negative impact on the mental health of young people. Demand for mental health support continues to increase in universities, making identification of factors associated with poorer outcomes a priority. Although social functioning has a bi-directional relationship with mental health, its association with effectiveness of psychological treatments has yet to be explored.

Objectives: To explore whether students showing different trajectories of change in social function over the course of treatment differed in eventual treatment outcome.

Methods: Growth mixture models were estimated on a sample of 5221 students treated in routine mental health services. Different trajectories of change in self-rated impairment in social leisure activities and close relationships (Work and Social Adjustment Scale (WSAS) items 3 and 5) during the course of treatment were identified. Associations between trajectory classes and treatment outcomes were explored through multinomial regression.

Results: Five trajectory classes were identified for social leisure activity impairment (Figure 1), and three classes were identified for close relationship impairment (Figure 2). For both measures the majority of students remained mildly impaired (Class 1). Other trajectories included severe impairment with limited improvement (Class 2), severe impairment with delayed improvement (Class 3), and, in social leisure activities only, rapid improvement (Class 4), and deterioration (Class 5). There was an association between trajectories of improvement in social functioning over time and positive treatment outcomes. Trajectories of worsening or stable severe impairment were associated with negative treatment outcomes.