

At the same time new intrahemispheric links in men under Resistance stage development are formed mainly in the right frontal region (alpha1,2,3-subbands).

Conclusions: Connectivity patterns displayed gender-related variations that are associated with the difference in the alterations in the attention focusing, working memory, and emotional processes under burnout formation.

Disclosure: No significant relationships.

Keywords: functional connectivity; gender; emotional burnout; Resistance stage

EPP0553

Is repetitive Transcranial Magnetic Stimulation really effective in the treatment of major depression? – Results of a Meta-Analysis

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Introduction: Clinical studies demonstrated the efficacy of rTMS treatment in major depressive disorder. However, the results of meta-analyses are contradictory due to the heterogeneity of the included studies.

Objectives: The aim was to analyse the effectiveness of rTMS for treatment-resistant major depression.

Methods: A systematic literature review of English-language articles published in the last 10 years was performed on PubMed and Scopus databases according to PRISMA guideline principles. To assess the effects of rTMS on response and remission rates, random-effects model and inverse variance method were used.

Results: 23 randomized double-blind sham-controlled studies met the inclusion criteria for quantitative analysis for response (n= 1020 patients) and 12 studies for remission (n= 846 patients). The relative risk for response and remission were 2.19 (95% CI: 1.68-2,86, p=0.000 n=912) and 2.65 (95% CI: 1.32-5,31, p=0.002, n=603), respectively using rTMS as add on treatment (in patients after two antidepressant treatment failures) compared to standard pharmacotherapy. I² analysis showed no considerable heterogeneity in the combined effect sizes neither for remission studies (I²=23.36%) nor for response studies (I²=0.00%).

Conclusions: Transcranial magnetic stimulation became an evidence-based, effective treatment for treatment-resistant major depressive disorder, either as a monotherapy or as an augmentation of pharmacotherapy. However, because of the lack of standardized protocol, a substantial methodological heterogeneity exists. According to our results, rTMS was significantly more effective than sham rTMS in both response and remission outcomes, which is consistent with previous meta-analyses, but the effect size was a bit smaller than what was reported previously.

Disclosure: No significant relationships.

Keywords: rTMS; Depression; metaanalysis

EPP0555

A review of brain stimulation and neuromodulation therapies as a treatment of depression as a behavioural and psychological symptom of vascular dementia

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Introduction: Vascular dementia (VaD) accounts for approximately 15% of all cases of dementia. While there are many different definitions of vascular dementia, it is generally understood to refer to “disease with a cognitive impairment resulting from cerebrovascular disease and ischaemic or haemorrhagic brain injury”.

Research suggests that 30% of patients with VaD also suffer from depression. The treatment of depression in VaD with pharmacological therapy is relatively well-established, with the first line drug being a selective serotonin reuptake inhibitor (SSRI). However, a relatively under-researched area is the use of brain stimulation and neuromodulation therapies for the treatment of depression in VaD.

Objectives: This review aims to provide a critical analysis on the efficacy and safety of brain stimulation therapies in treating depression in VaD to determine whether it is an appropriate treatment option.

Methods: The databases used were PubMed and WebofScience. The available literature was analysed which resulted in three papers which met the inclusion criteria and were critically appraised.

Results: In all three studies, depressive symptoms improved after ECT was administered, regardless of the specific tool used to measure the severity of depression. The side effects experienced were also only temporary and resolved independently which speaks to the safety of ECT as a treatment option.

Conclusions: The results of the study prove that ECT is a safe and effective option in treating depression in VaD. However, more research is needed for the medical community to fully understand the different treatment options and say with certainty which is the safest and most effective.

Disclosure: No significant relationships.

Keywords: vascular dementia; Depression; ECT; brain stimulation therapies

EPP0557

Electroconvulsive Therapy’s use in Idiopathic Intracranial Hypertension with Mood Disorder: caution, promise, and progress

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Introduction: Idiopathic Intracranial Hypertension (IIH) is a condition characterized by an increase of intracranial pressure (ICP) with no identifiable cause to date. One-half of patients who suffer from IIH have co-morbid mood disorders, such as Major Depressive Disorder (MDD), that can be refractory to pharmacologic treatment.

Electroconvulsive Therapy (ECT) is a safe and effective treatment for treatment-refractory mood disorder, but possesses a relative contraindication for IIH due to its theoretical increase in ICP. Can ECT become the gold-standard treatment modality for mood disorder from IIH?

Objectives: We aim to synthesize and summarize the state of the literature surrounding the intersection of ECT and IIH. We will present notable findings and propose avenues for future investigation.
Methods: We conducted a literature review using PubMed's search function. Key terms that were queried are as follows: Idiopathic Intracranial Hypertension, Pseudotumor Cerebri, Benign Intracranial Hypertension, Mood Disorder, Major Depressive Disorder, ECT, Electroconvulsive Therapy.

Results: The prevailing theory of IIH and mood disorder centers around HPA axis dysfunction, which has been heavily theorized to be positively impacted with ECT. ECT itself may not increase the ICP, but the anesthesia might. The only two case reports in the literature presented safe and successful use of ECT's in patients with IIH and MDD.

Conclusions: More data is needed to draw conclusions, as the literature surrounding ECT's use in patients with IIH remains sparse. Further studies must explore whether ECT's use in IIH remains effective. Through this, we may understand more about both IIH and ECT itself.

Disclosure: No significant relationships.

Keywords: mood disorder; Idiopathic Intracranial Hypertension; Pseudotumor Cerebri; ECT

Mental Health Care 02

EPP0558

The interaction of love in clinical care and its connection with burnout of health professionals

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Introduction: The phenomenon of love in the clinical field, in other words, the practical love through specific features, is the "ultimate investment" of the well-being, both to the patient and to the health professional.

Objectives: The aim of this research study is to investigate the role of love and its connection with burnout in the context of clinical professional care.

Methods: The study was cross-sectional and was conducted from September 2020 to February 2021 at the Nursing Department of University of Ioannina, Greece. The sample of the present study was determined to be health professionals, both sex from all over Greece. The research tools which were used in the quantitative study were: 1) Socio-demographic questionnaire, 2) Measurement of social representations of love and 3) Maslach Burnout Inventory - MBI.

Results: The results of the present quantitative research showed that gender, religion, family environment, place of residence, years of work and job position of health professionals affect the love and compassion they can show and offer to their patients, and the love is

related to the level of burnout they experience ($p < 0.05$), in the context of clinical occupational care.

Conclusions: In conclusion, love, its traits and expression of the feelings of health professionals, determine the level of clinical care and the burnout of health professionals.

Disclosure: No significant relationships.

Keywords: health professionals; burnout; Love; Care

EPP0560

Is it exhausting to be a healthcare worker these days?

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Introduction: People spend a large part of our lives in the workplace. Stress at work, demotivation and mental exhaustion are consequences derived from stressful situations that can be generated at work.

Objectives: Detection in hospitals of those workers susceptible to exhaustion, work stress or personal demotivation to avoid a problem in the worker's mental health, allowing early intervention and health strategies.

Methods: A cross-sectional study was carried out that included 84 healthcare workers from Spain in October 2021, through an anonymous, voluntary and multiple response type online survey which included questions about sociodemographic aspects and the Maslach burnout inventory

Results: 62% were doctors and 29% were nurses, 3 workers were nursing assistants, 2 orderlies, 1 psychologist and 1 physiotherapist. 13% of workers report having received / thought about requesting care from a mental health team (psychologist / psychiatrist) in the last year. 8% admit to having had suicidal ideas in the last year. 30.6% report being emotionally exhausted from their work always and almost always. 15.3% report that working with patients every day is stressful for them. 29.4% report feeling "burned" by work. Only 28.2% say that they are always or almost always with a lot of vitality. 20.2% feel that they are at the limit of their possibilities.

Conclusions: Detection in hospitals of those people susceptible to exhaustion, work stress or personal demotivation to avoid a problem in the worker's mental health, allowing early intervention and health strategies.

Disclosure: No significant relationships.

Keywords: Stress; personal demotivation; healthcare workers; mental health

EPP0561

Mental well-being in residents of monolingual and multilingual regions of Russia

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