

Meanwhile, the number of assisted suicides is higher than the number of suicides. The extent to which the one phenomenon is related to the other is open to debate.

The topic is controversial among the general public and the medical profession. Nevertheless, the Swiss Academy of Medical Science has published guidelines on dealing with dying and death, which also deal with physician-assisted suicide.

Various associations, including the umbrella organisation for suicide prevention in Switzerland, Ipsilon, are in favour of special protection for vulnerable groups. Some of them also recommend that civil law provisions be made for the process of assisted suicide.

Disclosure of Interest: None Declared

WS0008

The Impact of cognitive remediation combined with mindfulness and social skills training on social functioning and neural plasticity in early psychosis: preliminary results from a randomized clinical multicentric trial in Italy

C. Perlini^{1,2*}

the research group on ‘The impact of cognitive remediation on social functioning and neural plasticity in early psychosis: a randomized clinical trial’

¹Department of Neurosciences, Biomedicine and Movement Sciences, Section of Clinical Psychology, University of Verona and ²Clinical Psychology Service, Verona University Hospital, Verona, Italy

*Corresponding author.

doi: 10.1192/j.eurpsy.2024.120

Abstract: Affective and non-affective psychoses are characterized by deficits in neuro and social cognition, which strongly impact the patient’s psychosocial functioning and health and social system. Recent literature suggests that such deficits could benefit from the innovative combination of evidence-based interventions.

This lecture aims to describe an Italian multisite (Verona, Milano, Pavia), longitudinal randomized controlled trial funded by the Italian Ministry of Health investigating the impact of Cognitive Remediation (CR) alone or combined with other approaches (namely, Mindfulness and Social Skills Training (SST)) on clinical, neuropsychological, social and brain-related outcomes in patients with a DSM5 diagnosis of affective or non-affective psychosis.

In our study, patients underwent clinical and neuropsychological evaluation at baseline (T0), end of treatment (T1), and six months post-treatment (T2), which consisted of nearly four months of CR, CR+ Mindfulness, or CR + SST. The cognitive assessment included the Brief Assessment of Cognition for Schizophrenia (BAC-S) or Affective Disorders (BAC-A) and the Executive and Social Cognition Battery (ESCB), specifically designed to identify impairments in social cognition and executive functions in patients’ real life. Participants underwent a 3T multimodal MRI, including structural and functional sequences at T0 and T1. We also recruited healthy controls for comparative brain mapping at T0.

The present lecture will provide an overview of the research project, along with some preliminary findings on the effect of CR alone or combined with other interventions on clinical and social functioning and brain plasticity, with a focus on the degree of durability and generalization of CR effects to patients’ real life. The study’s

outcomes have the potential to inform clinical and rehabilitative settings and tailor combined therapeutic interventions.

Disclosure of Interest: C. Perlini Grant / Research support from: Italian Ministry of Health GR-2016-02361283

WS0009

Utility of risky cannabis use concept and the role of standard units for achieving an operational definition

H. Lopez-Pelayo^{*} and C. Oliveras

Hospital Clínic Barcelona, Barcelona, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2024.121

Abstract: Over the past decade (2010-2019), the number of people admitting to using cannabis in the European Union (including the United Kingdom, Norway, and Turkey) increased by 27%, from 3.1% to 3.9%. Notably, Portugal, Spain, and Luxembourg topped the list with the highest percentages of daily cannabis users among those who had consumed the substance in the last month.

With the relaxation of recreational cannabis laws in various European countries, such as Germany, Malta, and Luxembourg, there is a growing need for a public health-oriented and preventative approach. Drawing parallels with alcohol-related strategies, this session aims to explore this evolving landscape from a clinical perspective.

The focus will be on the World Health Organization’s definition of risky substance use, aiming to make it practical and applicable. Two existing proposals from Canada and Spain will be reviewed, with an emphasis on the role of standardized cannabis units in defining risk and the quest for consensus in this regard.

Additionally, the session will examine the similarities between alcohol and cannabis consumption, looking at the effectiveness of the Standard Drink Unit in early intervention and prevention of alcohol-related problems. Insights from the alcohol domain will be discussed, offering valuable lessons for preventing cannabis-related harm.

Disclosure of Interest: None Declared

WS0010

Moving forwards with the Standard THC Unit: what are the next steps?

V. Lorenzetti^{1*}, iCannToolkit Working Group and T. Freeman²

¹Neuroscience of Addiction and Mental Health Program, Healthy Brain and Mind Research Centre, Australian Catholic University, Melbourne, Australia and ²Psychology, University of Bath, Bath, United Kingdom

*Corresponding author.

doi: 10.1192/j.eurpsy.2024.122

Abstract: Current metrics of cannabis use are inconsistent. This issue prevents the integration of the literature to date and to robustly measure the health risks and benefits associated with

specific levels of cannabis consumption. This talk will overview a number of international initiatives to improve the current metrics of cannabis use.

The Standard THC Unit was created to objectively measure cannabis potency across all products, mode of administration, jurisdictions, contexts and over time.

To build upon the notion of the Standard THC Unit, additional multidisciplinary, international consensus based frameworks have been created.

One such ongoing initiatives, seeks to reach expert consensus on how cannabis potency should be reported in cannabis products in order to clearly and effectively inform consumers. The talk will overview preliminary results of the Delphi.

A similar Delphi methodology was used to establish internationally agreed-upon minimum standards to measure cannabis consumption in research (iCannToolkit), the results of which will be outlined.

Overall, it is imperative for cannabis researchers to join forces with multidisciplinary experts in order to improve metrics of use to inform consumers, general practitioners, researchers and public health experts on the harms and benefits associated with cannabis use.

Disclosure of Interest: None Declared

WS0011

Implementation of the self-sufficiency matrix (SSM) to support diagnosing people with complex social needs at the Social Services of Catalonia

C. Salrach^{1,2,3*}

¹Avedis Donabedian Research Institute, Barcelona; ²Universitat Autònoma de Barcelona (UAB), Sant Cugat del Vallès and ³Network for Research on Chronicity, Primary Care, and Health Promotion (RICAPPS), Barcelona, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2024.123

Abstract: The Department of Social Rights of the Generalitat de Catalunya considered using a unique tool to identify people with complex social needs at Social Services centres and to support the diagnosis processes. After conducting a thorough search and selection process for various tools, the self-sufficiency matrix (SSM), a Dutch tool, was ultimately chosen.

The tool was adapted to the Catalan context through a transcultural translation process, which included a pilot and validation process. This resulted in the creation of the Catalan matrix (SSM-CAT).

A comprehensive implementation program was defined to start the adoption of the tool at basic social services. This program included training trainers and providing online training with practical cases. The implementation process was accompanied by support and monitoring to ensure success.

Through this process, over 3,468 professionals (including 334 trainers) received training on the self-sufficiency matrix, and 31,354 individuals who received basic social services in Catalonia were evaluated. In Barcelona, a more thorough monitoring of the implementation was conducted, assessing a representative sample of the care provided (6,916 individuals attended) generating a more

accurate description of the situation of the people attended by social services in the city of Barcelona.

Disclosure of Interest: None Declared

WS0012

Innovation in the treatment, interventions and systems of care for opioid use disorder: opportunities to understand multimorbidities

A. M. Baldacchino

Medicine, University of St Andrews, St Andrews, United Kingdom

doi: 10.1192/j.eurpsy.2024.124

Abstract

Introduction: Opioid use disorder is still the main presenting illicit substance use disorder that patients present within Addiction and Mental Health Services even though the majority of the patients are polysubstance users. Innovation in the field will allow providers to understand better how systems work to support a population with physical and psychological morbidities

Method: We will present novel narratives in describing:

1. Standards and principles
2. Pharmacology
3. Delivery systems
4. Neuroscience based interventions
5. Systems and implementation

Results and Discussion: The above descriptors will allow a landscape that is less stigmatising and better in responding to the needs of the people who are highly stigmatised and multidisadvantaged.

Disclosure of Interest: None Declared

WS0013

Organized professional response to a large-scale disaster: Earthquakes in Türkiye

K. Başar

Department of Psychiatry, Hacettepe University, Ankara, Türkiye

doi: 10.1192/j.eurpsy.2024.125

Abstract: In February 2023, a series of earthquakes with high magnitudes affected 11 cities in Türkiye, a region with a population of over 13 million. With more than 50000 recorded deaths and more than 3 million survivors replaced, rescue and recovery efforts were challenging. The Psychiatric Association of Türkiye (PAT) immediately launched a “Disaster and Crisis Management,” which urgently formed and installed a program for psychosocial support and psychiatric care. The program included immediate, medium, and long-term actions. Hundreds of recruitments followed a call for volunteers for on-site and online support. An online “Earthquake and Mental Health” library was launched immediately, and a series