

set. This limitation, together other data robustness issues, including the probability of under reporting by staff mean that firm conclusions cannot be drawn. This remains an area where urgent further research is needed, both to identify the extent of the problem, and to probe the impact violence has on staff and patients.

Understanding the Developmental Pathways and Onset of Bipolar Disorder and Borderline Personality Disorder in Young People: A Systematic Review of Reviews

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Aims. There is still an ongoing debate on the nosological position of Bipolar Disorder (BD) and Borderline Personality Disorder (BPD). Identifying the unique and shared risks and developmental pathways in emerging BD and BPD could help the field refine aetiological hypotheses of these disorders. The study aims were to systematically synthesise the available evidence from systematic reviews and meta-analyses concerning environmental, psychosocial, biological, and clinical factors leading to the emergence of BD and BPD to identify the main differences and common characteristics between the two disorders to characterise their complex interplay whilst highlighting remaining evidence gaps.

Methods. A literature search was conducted PubMed, PsychINFO, EMBASE, Cochrane, CINAHL, MEDLINE, and ISI Web of Science as the data sources. 19 systematic reviews and meta-analyses involving 217 prospective studies met eligibility criteria.

Results. Results demonstrated that family history of psychopathology, affective instability, attention deficit hyperactivity disorder, anxiety disorders, depression, sleep disturbances, substance abuse, psychotic symptoms, suicidality, childhood adversity and temperament dimensions were common predisposing factors across both disorders. There are also many distinct variables that could be found early in the course of both disorders. Most of the factors should be considered as a general, nonspecific precursor signs and symptoms of both BPD and BD, apart from subsyndromal depression, subsyndromal hypomania, cyclothymia disorder, psychotic symptoms, age at onset of major depression and frequency and loading of affective symptoms.

Conclusion. Although the findings of this review may lead to support the view of BD and BPD as two distinct disorders, there is not sufficient data to either indicate that BD and BPD are separate nosological entities or that BPD should be considered as an extension of BD disorders. Future research is required to increase our understanding of the aetiology of BD and BPD onset and their complex interplay by conducting prospective studies which concurrently examine multiple measures including biological, environmental, psychosocial and clinical factors in BD and BPD at-risk populations. Large, multilevel data sets will enable deep phenotyping and distinguish pathophysiological pathways.

Transcranial Direct Current Stimulation in the Treatment of Post-Laminectomy Syndrome: A Clinical Trial

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Aims. To evaluate the effectiveness of Transcranial Direct Current Stimulation (tDCS) in treatment of post-laminectomy syndrome.

Methods. Twenty-four patients were randomized in three groups to receive active or sham anodic stimulation (1.5 mA, 20 minutes for five consecutive days, with 25cm² electrodes) in two different areas (primary motor cortex (M1) vs. dorsolateral prefrontal cortex (DLPFC), according to lateralization of pain. Brief Pain Inventory (BPI) and Visual Analogue Scale (VAS) were instruments used to assess pain, while Clinical Global Impression Scale (CGI) was applied to measure severity disease and clinical response. Additionally, the quality of life assessment was based on World Health Organization Quality-of-Life Scale (WHOQOL-BREF). In order to identify psychiatric comorbidities, Beck's Depression Inventory (BDI) and Beck's Anxiety Inventory (BAI) tests were applied. Comparisons between groups were performed using one-way ANOVA, ANOVA-Welch, Kruskal-Wallis, Man-Whitney, and Fisher's test.

Results. It is observed that there was a statistically significant difference (difference 0,15† [95% CI, 7,07 ± 1,39]) in the way individuals assess their quality of life and the improvement in pain intensity by VAS, especially in M1. The assessment of quality of life among those who showed improvement was higher than those who did not improved.

Conclusion. Application of tDCS in primary motor cortex (M1) produced an improvement in pain pattern in patients with post-laminectomy syndrome. Our data suggest that tDCS - a low-cost, technically simple and highly tolerable technique, is a promising technique for management chronic pain in disorders such as post-laminectomy syndrome.

Exploring School Students' Knowledge and Expectations of Careers in Psychology, Psychiatry and Mental Health Nursing: A Thematic Analysis

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Aims. Attracting more doctors and nurses to mental health careers is vital to support the growing demand for mental health services. Despite low numbers of doctors choosing psychiatry, and a shortage of mental health nurses, psychology degrees remain a popular choice. This study explores the understanding and knowledge students studying psychology A Level have about mental health careers, and the careers guidance they have received. We ask 'are students who are interested in studying psychology at university an untapped resource for recruitment to psychiatry and mental health nursing?'

Methods. Focus groups were held with A-Level psychology students considering applying to university to study psychology. Focus group discussions were recorded, transcribed and anonymised and were analysed using thematic analysis.

Results. Three key themes were identified. Firstly, student interest in psychology as a degree subject (with mental illness, neurobiology and human behaviour cited as key interests). Secondly,

student motivation for a future career in which they would have a therapeutic role working with people with mental illnesses. Thirdly, student knowledge, or lack of it, around what a career in psychology or other mental health careers would entail, and the pathways to these.

Conclusion. There remains uncertainty in young people regarding what the different types of mental health practitioner roles are, and the career pathways to these. More detailed, accurate information made available to students interested in working with people with a mental illness may lead to more students considering a career in mental health nursing or medicine (and then psychiatry) as an alternative to a psychology. It is important that those aspiring to become clinical psychologists understand the qualifications required and competitive nature of this profession. Inaccurate information runs the risk of students acquiring significant university debt, only to find they are not qualified for the type of role they envisaged. A lack of accurate, high quality and timely careers information may also be depriving psychiatry and mental health nursing of enthusiastic, able and motivated students. This study adds support to the need for better careers guidance and awareness around mental health careers for school and sixth form students.

Is Cannabis Abstinence Related to Subsequent Reduced Risk of Psychosis? a Nested Retrospective Case Control Hierarchical Survival Analysis

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Aims. There is strong evidence from systematic reviews and meta-analyses that cannabis use is related to an elevated risk of developing a subsequent psychotic illness. It is less clear if the length of cannabis abstinence is related to the risk of developing a psychotic episode. We explore the relationship between length of cannabis abstinence and subsequent risk of a psychotic episode.

Methods. We included patients aged 18–64 years who presented to psychiatric services in 11 sites across Europe and Brazil with first-episode psychosis and recruited controls representative of the local populations. We excluded all patients who reported no past history of cannabis use. We carried out hierarchical survival analyses on probability weighted data to examine the relative hazards of cessation of cannabis abstinence between cases and controls. Data on cannabis abstinence were collected retrospectively by participant recollection. We controlled for ethnicity, age, length of education and history of cigarette smoking. Proportionality assumptions were verified using Kaplan Meier plots, log-log plots and scaled Schoenfeld residuals. There was some evidence of non-proportional hazards and the assumptions of proportionality were relaxed by introducing caseiness as a time varying co-variate with time specified as its natural log.

Results. We included 506 cases and 482 controls with a mean age of 30.12 years (sd = 9.97). Cases had an elevated hazard ratio of cannabis use versus cannabis abstinence in controls (HR = 6.11 [SE = 1.43; $p < 0.001$]). There was no evidence of a difference associated with ethnicity ($p = 0.198$) but there were statistically significant differences at the 5% level between age groups. Ages 23–27 had a hazard ratio of 0.528 (SE = 0.064; $p < 0.001$) versus those 18–22 years old. For ages 28–32, 33–44 and 43 to 64, the hazards ratios were 0.311, 0.110 and 0.100 (all statistically significant; $p < 0.001$) respectively.

Conclusion. Abstinence of cannabis use is related to a reduced hazard of having a subsequent psychotic episode. The magnitude of the hazards for a subsequent psychotic illness is highest in those 18–22 years old and decreases with increasing age. Cannabis cessation maintenance therapies may have greater impact if targeting younger rather than older cannabis users who are at an elevated risk of developing a psychotic illness.

An Explorative Study to Assess the Suicidal Risk Amongst Infertile Patients

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Aims. To assess the psychosocial impact of infertility amongst female infertile patients including suicidal risk/ suicidal ideation in the given study population.

Methods. A total of 300 women attending the Obstetrics and Gynecology out patients department of a tertiary hospital in Kolkata, India were selected by simple random sampling. 100 fertile women attending the routine ante natal clinic were selected as cases and 100 infertile women seeking fertility treatment were selected as controls. 100 women didn't follow up with the study. The following questionnaires were administered to both case and control group- BAI, BDI, SCL-90-R, SF-36, MINI and socio demographic proforma ; by trained clinic psychologist .

The raw scores & adjusted scores were analysed statistically by SPSS using the following tests, independent t test, chi square test and Z test.

Results. The results of the MINI scale indicate that up to 25% of the infertile cohort suffer from suicidal risk/ suicidal ideation which is statistically significant in comparison to the control group.

The other psychosocial parameters are also statistically significant in the case in comparison to the control population.

Conclusion. Although the psychosocial impact of infertility has been well researched and documented. Few studies have been conducted globally which assess suicidal risk amongst infertile patients.

Our results corroborate earlier studies such as the Danish administrative population-based registry study by Trille Kristina Kjaer et al which found a causative link between infertility and suicidal risk.

Further research is needed in this direction.

An Explorative Study to Assess the Neuropsychiatric Impact of COVID-19

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Aims. To assess the neurocognitive and psychiatric impact of SARS-CoV-2 in COVID-19 recovered patients in a district COVID hospital in West Bengal, India.

Methods. A total of 300 COVID-19 recovered patients who had suffered from SARS-CoV-2 and admitted at a district COVID hospital in West Bengal were selected by simple random sampling method. Informed consent was obtained from these patients. Subsequently a questionnaire based interview was conducted by trained clinical psychologist. The following scales were administered BDI (Depression), BAI, HAM A (Anxiety), SF 36 (Quality of Life),