

Mental health policies

EPP0779

Impact of “national suicide prevention week” on digital awareness of suicide prevention : an insight from google trends

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Introduction: Every year in the month of September, National Suicide Prevention Week is celebrated. The goal of suicide prevention week is to inform the public about suicide prevention, primarily the warning signs of suicide. However, the impact of this month on the general population is unknown. The Google trends show how frequent web searches have been performed for a particular search-term, which provide an approximation of the people’s interest.

Objectives: To evaluate public interest in suicide prevention by analyzing the google trends of “Suicide Prevention” search-term.

Methods: We estimated the interest in such topics by running the google trends data of the last decade by using the filter [Search Term: “Suicide Prevention”, Locations: “United States” and Time Ranges “ 2010 to 2020”].

Results: During this specific interval, people have searched “Suicide Prevention” most frequently during the month of September (month of National Suicide Prevention week). Conversely, in the other months, interest in “suicide prevention” fluctuated between little to none. The only other time people have shown interest in Suicide prevention, other than the month of September, was with suicide news in the media, such as the death of a celebrity by suicide, or suicide-related TV shows. [Figure]



Conclusions: Although it is not definitive, it gives some idea that National Suicide Prevention week has a considerable impact on population interest. Since we did not observe sufficient public

interest in other months, there should be frequent and systematic efforts to spread suicide prevention awareness among the general population.

Keywords: Mental Health Policy; Suicide; Suicide prevention; Mental Health awareness

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Characterization of compulsory hospitalization in the psychiatry department of Faro

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Introduction: The mental health law is not universal. In Portugal the urgent compulsory regimen is based on the principles of the presence of severe mental anomaly and risk to themselves or others.

Objectives: Characterization of patients admitted in compulsory hospitalization (CH) between 2018 and 2020, in the University Hospital Center of Algarve - Faro Department

Methods: Retrospective study from January/2018 to August/2020. Social, demographic, epidemiological and clinical data were evaluated.

Results: Of 1191 patients who were admitted 36% occurred in CH. There was a predominance in male sex (58%), the average age was 43 years old. For 62% it wasn't the first hospitalization and 58% had a recent prescription. Admission occurred most frequently because of the presence of psychotic symptoms (figure1) and according to the international classification of disease (ICD10) the most frequent diagnosis was unspecified nonorganic psychosis (figure2). At discharge 59% of the patients remained on compulsory treatment (CT), where the most frequent diagnosis was schizophrenia. Although most of these patients were discharged with oral and long-term injectable antipsychotics, there were higher rates of readmissions when compared to non-CT group, were the most frequent diagnosis was mental and behavioural disorders due to psychoactive substance use and most of the patients were discharged only with oral therapy.

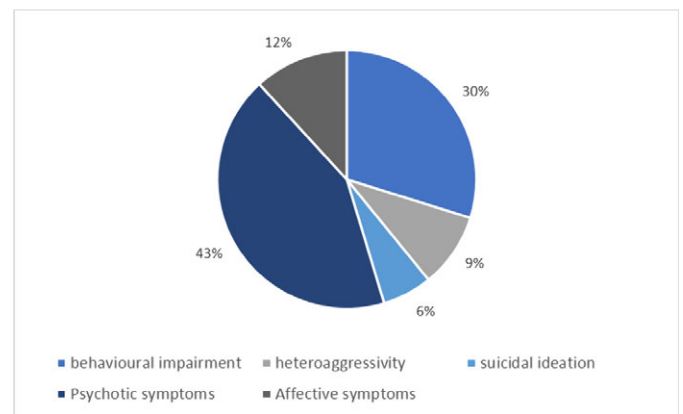


Figure 1: Admission symptom to Compulsory Hospitalization

ICD10	Non-CT	CT	TOTAL
F29 Unspecified nonorganic psychosis	39	45	84 (19.6%)
F10-F19 Mental and behavioural disorders due to psychoactive substance use	40	37	77 (17.9%)
F20 Schizophrenia	15	55	70 (16.3%)
F31 Bipolar affective disorder	27	38	65 (15.2%)
F25 Schizoaffective disorders	10	45	55 (12.6%)
F03 Unspecified dementia	17	3	20 (4.7%)
F60-F69 Disorders of adult personality and behaviour	7	12	19 (4.4%)
F22 Persistent delusional disorders	0	12	12 (2.8%)
F32 Depressive episode	8	4	12 (2.8%)
F40-F48 Neurotic, stress-related and somatoform disorders	6	0	6 (1.4%)
F70-F79 Mental retardation	4	1	5 (1.2%)
F50-F59 Behavioural syndromes associated with physiological disturbances and physical factors	1	1	2 (0.5%)
F05 Delirium, not induced by alcohol and other psychoactive substances	2	0	2 (0.5%)
	176	253	429
	(41.0%)	(59.0%)	

Figure 2: Diagnosis, according to the international classification of disease (ICD 10), in CT and Non-CT group

Conclusions: Patients in compulsory regimen have a severe mental illness with higher rates of readmission. We highlight the use of long-term injectable antipsychotics in terms of compliance. These findings corroborate the need for specialized and multidisciplinary approach in terms of psychosocial rehabilitation in these patients.

Keywords: compulsory hospitalization; urgent compulsory regimen; compulsory treatment

EPP0780

Features of clinical, psychological and socio-demographic characteristics of day hospital patients in the context of psychiatric service reform

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Introduction: The reform of the Moscow psychiatric service began in 2011 and was aimed at its optimization, reducing the inpatient level, actively introducing psychosocial rehabilitation, multidisciplinary teams of specialists and developing community-based forms of care. In 2016, the number of beds in day care hospitals in Moscow had doubled to reach 3500.

Objectives: Analyze the dynamics of characteristics of day hospital patients and propose measures to improve the quality of medical rehabilitation care provided.

Methods: Clinical and psychopathological, clinical and statistical, psychological, statistical of 337 schizophrenia patients discharged in 2010 and 2016.

Results: A comparative analysis of the results obtained in 2010 and 2016 indicates a change in the clinical, socio-demographic and psychological characteristics of patients treated in the day hospital. In 2016, the proportion of early stage disease patients with endogenous mental disorders (F20-F29, according to ICD-10) increased; the age of patients and the proportion of patients with disabilities decreased; the proportion of patients with preserved working capacity increased, demonstrating low rates of compliance and motivation for treatment, but higher rates of neuro-cognitive functioning. In 2016, only a fifth of patients received complex psychosocial therapy.

Conclusions: The modernization of the psychiatric service has improved the continuity between its inpatient and out-of-hospital units. To improve the quality of care in the day hospital and to prevent relapses of the disease, it is necessary to combine

pharmacotherapy with complex psychosocial treatment followed by a long-term personalized management of patients with the patient's families involvement.

Keywords: psychiatric; service; reform; psychosocial

EPP0783

Mental well-being in residents of different regions of Russia

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Introduction: Some attempts are being made to describe the mental health and well-being of the population in relation with the regional specifics in a particular area of the Russia, however, they are rare and local (limited to one region).

Objectives: The current study aims to identify sociocultural mediation of mental well-being based on its measures in Russia's regions with different ethno-cultural composition of population.

Methods: The study involved 210 men and 403 women aged 14 to 76 years ($M = 26.9$; $SD = 13.7$) from six regions of the Russian Federation: Moscow, St. Petersburg, Udmurtia, Sakha, Sverdlovsk and Kemerovo. The mental well-being of participants was assessed using the Warwick-Edinburgh Mental Wellbeing Scale (Tennant et al., 2006; Tennant et al., 2007).

Results: The measures of mental well-being were different in the regions: Moscow ($M=51.04$; $SD=8.03$), St.-Petersburg ($M=50.05$; $SD=5.78$), Udmurtia ($M=47.57$; $SD=9.50$), Sakha ($M=50.99$; $SD=8.47$), Sverdlovsk ($M=54.86$; $SD=8.43$), Kemerovo ($M=51.84$; $SD=7.51$). Using one-way analysis of variance (ANOVA), it was found that there are significant differences in the assessment of psychological well-being between study participants from different regions ($F = 6.692$; $p < 0.001$). Residents from the Sverdlovsk evaluate their mental well-being as significantly better than the ones from Moscow ($MD=3.821$; $p=0.012$), St.Petersburg ($MD=4.812$; $p=0.023$), the Udmurtia ($MD=7.284$; $p < 0.001$) and the Sakha ($MD=3.869$; $p=0.003$).

Conclusions: Residents from Russia's regions with different ethno-cultural composition of population demonstrate some difference in mental well-being measures that may be caused by sociocultural factors. The reported study was funded by the Russian Foundation for Basic Research, project number 17-29-02506.

Keywords: sociocultural mediation; regions of Russia; mental health; mental well-being

EPP0785

Characteristics of psychotic disorders occurring during immigration: Comparative study

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