

Telemedicine in addictions feasibility RCT – staff and patient qualitative satisfaction

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Aims. Opioid dependence has high risks. Opioid substitution treatment (OST) improves outcomes. Addiction specialist prescribers prescribe OST and monitor safety, but nonattendance may lead to worse outcomes. Telemedicine can reduce travel and improve attendance at appointments. Before COVID-19, we started a telemedicine in addictions trial to see if this helped in addictions. We present the qualitative patient and staff experience results.

Method. Health Research Authority approval for randomized controlled feasibility trial of Telemedicine versus Face-to-Face (control) consultations at community addictions semirural service (2500km²) using a modified Hub-and-Spoke (outreach) model. Adult opioid dependent patients prescribed OST and attending outreach were recruited. Participants received two appointments in randomized group. Telemedicine was delivered using Skype-for-business videoconferencing. Patients attended outreach, saw keyworker for drug testing first, and telemedicine conducted via keyworker's laptop. Addiction prescribers located remotely at Hub. Post-trial research interview conducted assessing patient and staff experience of Telemedicine versus Face-to-Face consultations. Data transcribed, inputted to RedCap Cloud and free-text analysed using qualitative thematic analysis.

Result. Of fifty-nine patient participants, 58 completed a research interview. Patient participants reported similar levels of satisfaction between the Telemedicine and Face to Face groups. The themes generated in relation to Face-to-Face were no difference, easy, kind staff and liking being part of research. For Telemedicine, themes were less travel, good experience, easier to access, good communication, saves time and saves money. For instance, one patient stated 'Clear, easy to access less travel' and another patient stated 'I struggle with travel. I found it easier'. Of 19 staff participant research interviews completed, Staff reported Good or Very Good experience with telemedicine which was equivalent for Face-to-Face consultations. Eleven staff had experience of telemedicine consultations during the trial. They reported similar themes to patients with telemedicine leading to less travel, beneficial to patient care, improves attendance and was innovative technology. One staff member reported satisfaction with telemedicine due to 'Time, travel and money reduction'. When questioned on the downsides to telemedicine, technological issues were mainly related to connection issues and sound issues.

Conclusion. In the first known RCT of Telemedicine versus Face-to-Face consultations for patients with opioid dependence attending prescriber review, we found that both patients and staff were satisfied with telemedicine as compared to face-to-face consultations. Overall themes were reduced travel, saving time and more convenience. This will be very important given the impact of COVID-19 on access to addictions services.

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Resolving the discrepancies of suicide risk in obsessive-compulsive patients: a review of incidence rates and risk factors of suicide and suicide attempts in OCD

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Aims. Obsessive-Compulsive Disorder (OCD) describes a mental health condition in which affected patients experience persistent obsessions, which may often, but not always result in compulsions, causing major distress and anxiety. Obsessions are defined as intrusive thoughts with a high emotional valence, whereas compulsions are repetitive actions, which demonstrate the attempt to eliminate obsessive thoughts.

When speaking of OCD, risk of suicide is rarely a topic of concern. There is still no consensus about whether OCD and suicide are associated. Early schools of clinical sciences propose a low risk of harm, which was taught to most mental health practitioners currently working in health services. Moreover, the World Health Organisation currently classifies OCD as the 11th leading cause of nonfatal burden, indicating that despite the potential for causing significant disabilities, OCD does not pose any serious health risks. Contemporary evidence, however, suggests that the risk for suicide may be underestimated.

This literature review aims to cumulate evidence for the risk of suicide in OCD and its associated underlying factors to clarify and resolve the discrepancies that currently exist regarding this topic.

Method. To identify eligible studies, the databases MEDLINE(R), PubMed, and PsycINFO are used. Selected studies provide data on suicide rates, attempts, and risk factors. Grey literature is included in the review to consider results from studies which may not have qualified for publishing. This literature review is conducted according to the PRISMA guidelines.

Result. After deduplication, 653 studies could be found out of which 15 studies meet the inclusion criteria. Rates of suicide attempts appear to lie between 12% and 27%. Death-to-suicide rates in OCD are shown to range from 0.7% to 1.4%. Associated risk factors for suicide in OCD include, mistrust and unacceptable thoughts, depression, and comorbid substance use disorders. The strongest predictor for death caused by suicide is having a history of previous suicide attempts. Higher education and comorbid anxiety disorders act as protective factors. Lastly, gender differences remain unclear since some studies classify female sex as a protective, and some as a risk factor.

Conclusion. This review provides a good overview of the actual risk for suicide in OCD. Current evidence suggests high suicidality in patients with OCD, leading to suicide attempts in affected patients, but not necessarily resulting in death, as the death-to-suicide rates are low. Genetic heritage and comorbidities of further mental health disorders may increase the risk for suicide in OCD.

Pharmacological management of tourette's syndrome comorbid with obsessive-compulsive disorder in adult patients

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Aims. Tourette's Syndrome (TS) is a neurodevelopmental disorder, which often presents in childhood and is hallmarked by motor and vocal tics. Obsessive-Compulsive Disorder (OCD) is a chronic neuropsychiatric condition characterised by intrusive thoughts and time-consuming repetitive behaviours. Research suggests that 15-20% of adult patients with TS will also meet