



Conclusions: While screening for depressed mood is now common in primary care, we found it useful to screen for specific symptoms of depression in older persons (including insomnia, change in eating habits, facial expression, and anxiety) in a primary setting.

Disclosure: No significant relationships.

Keywords: Elderly; Anxiety; mental health problem; Depression

Old Age Psychiatry 02 / Rehabilitation and Psychoeducation 02

EPP0601

Integrating services improve the return-to-work process for people on sick leave with stress-related disorders: results from a randomized trial (n=666)

A. Hoff

Capital Region Psychiatry, CORE - Copenhagen Research center for Mental Health, Capital Region Mental Health Services, KØBENHAVN N, Denmark

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Introduction: Stress-related disorders are common and associated with suffering and a large societal burden. While treatment appears to be able to reduce symptoms, evidence of interventions to improve work outcomes is inconsistent. Lack of integration

different service domains has been suspected to be a barrier in return-to-work (RTW) processes.

Objectives: We aimed to test the effectiveness of integrating vocational rehabilitation and mental health care.

Methods: We randomized participants on sick leave to I) service as usual (SAU), II) improved mental health care (MHC) or III) integrated interventions (INT). Primary outcome was RTW-rates measured at 12 months. Secondary outcomes were proportion in work at 12 months, RTW-rates measured at 6 months, and symptom levels at 6 months.

Results: We randomized 666 participants. Regarding primary outcome, the SAU group was superior to both MHC and INT. Furthermore, SAU was also superior to INT and MHC on almost all other work-related outcomes. INT and MHC did not show differences on any work-related outcome. On several symptom scales, MHC was observed with lower scores than SAU, whilst INT did not differ from the two other groups.

Conclusions: Both the integrated intervention (INT) and the (non-integrated) mental health care (MHC) intervention lowered return-to-work rates compared with service as usual (SAU), and thereby yielded worse outcomes. However, the MHC group intervention showed a tendency towards having lower symptom levels compared with those in the SAU group; accordingly, the SAU group is not unequivocally superior. INT and MHC showed no general differences.

Disclosure: No significant relationships.

Keywords: vocational rehabilitation; Stress; integrated care; Exhaustion

EPP0604

Investigation of alpha-synuclein in patients with late-onset schizophrenia

E. Palchikova^{1*}, M. Nikolaev², A. Lavrinova², N. Neznanov³, S. Pchelina² and N. Zalutskaya¹

¹V.M.Bekhterev National Medical Research Center for Psychiatry and Neurology, Geriatric Psychiatry, St.Peterburg, Russian Federation;

²Saint Petersburg Nuclear Physics Institute Named by

B.P. Konstantinov of National Research Centre "Kurchatov Institute", Molecular Biology, Saint Petersburg, Russian Federation and

³Bekhterev National Medical Center for Psychiatry and Neurology, Geriatric Psychiatry, Saint-Petersburg, Russian Federation

*Corresponding author.

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Introduction: There is no consensus about whether late-onset schizophrenia (LOS) is a type of schizophrenia or a secondary psychotic disorder. One of the theories of the occurrence of late-onset psychoses is neurodegeneration caused by the imbalance of proteostasis.

Objectives: To study the concentration and expression of alpha-synuclein in patients with LOS compared with controls.

Methods: The study involved 42 patients with the ICD-10 criteria of schizophrenia with the onset of the disease after 45 years and 104 controls with no dementia and severe somatic pathology, comparable in age and gender. The alpha-synuclein level was estimated in a lymphocytic cell fraction from patients with LOS N=42 and controls N=104 using the Human alpha-synuclein ELISA kit. The expression of the SNCA gene was studied in 22 LOS patients and 22 controls and determined by PCR using the SYBR Green Supermix

kit and the CFX96 instrument in comparison with the referent genes using previously developed primers. LOS group underwent psychopathological examination including scales. Statistics: SPSS 12.0; the Mann–Whitney test; exponential regression analysis; data is given as median (min–max). The level of significance was set at $p < 0.05$.

Results: The alpha-synuclein level is higher in patients with LOS (9.21 (0.78–29.52)) compared to control (6,355 (0.46–35.44)), $p = 0.024$. The mRNA level of the SNCA gene is higher in the LOS group (0.533 (0.089–1.406)) compared to controls (0.087 (0.016–0.266)), $p < 0.001$.

Conclusions: Our study shows the relationship of alpha-synuclein with the manifestations of LOS. Obtained novel data can open up new targets for therapy and bring it closer to understanding the phenomenon.

Disclosure: No significant relationships.

Keywords: schizophrenia; proteostasis; alpha-synuclein; late-onset psychosis

EPP0606

Dissemination of sport-based psychosocial interventions in Europe: results from the EASMH project

G. Sampogna^{1*}, M. Borgi², F. Cirulli², B. Collacchi², S. Cerino³, V. Di Tommaso³, S. Moliterni³, A. Bichi⁴, C. Barat⁴, A. Pringle⁵, S. Kivisto⁶, I. Melenco⁷, A. Oltean⁷, J. Garside⁸ and A. Fiorillo⁹

¹University of Campania “Luigi Vanvitelli”, Department Of Psychiatry, Naples, Italy; ²Istituto Superiore Sanità, Section On Neuroscience, Rome, Italy; ³ECOS, Ecos, Rome, Italy; ⁴EPSI, Epsi, BRUSSELS, Belgium; ⁵University of Nottingham, Psychiatry, Nottingham, United Kingdom; ⁶University of Tampere, University, Tampere, Finland; ⁷university of Costantia, Sport, Romania, Romania; ⁸Everton in the Community, Everton In The Community, London, United Kingdom and ⁹University of Campania, Department Of Psychiatry, Naples, Italy
*Corresponding author.

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Introduction: Among psychosocial interventions, recent studies have highlighted that sport-based interventions can positively impact on the long-term outcomes of patients with severe mental disorders, in terms of improving their quality of life and promoting social inclusion. Although sport-based interventions should be considered an effective strategy for promoting patients’ recovery, few data are available on their dissemination in the clinical routine care in Europe.

Objectives: to evaluate the availability of sport-based psychosocial interventions in European countries.

Methods: In the framework of the EU-Erasmus+, the European Alliance for Sport and Mental Health (EASMH) project has been funded. In order to evaluate the availability of sport-based interventions, an ad-hoc online survey, sent to national mental health centres, has been developed.

Results: 103 responses were obtained (49 from Italy, 31 from UK, 17 from Finland and 12 from Romania). The respondents were mainly psychiatrists working in community mental health centers. Sport-based interventions were frequently provided by mental health services, in particular in Italy, UK and Finland. While in UK and Finland sport-based interventions are commonly offered to all patients, in the other countries these are provided only by

patient’s request. The most frequent types of sport practised were: running, football, volleyball, tennis and table tennis and basketball. Almost all respondents reported to not use a dedicated monitoring tool for evaluating the efficacy of those interventions.

Conclusions: Sport-based interventions are not frequently provided in the routine clinical settings, although no monitoring tools are routinely adopted. The EASMH aims to fill this gap by disseminating good clinical practice related to sport-based interventions.

Disclosure: No significant relationships.

Keywords: rehabilitation; social integration; sport; Recovery

Women, Gender and Mental Health 02

EPP0607

Anxiety and depression among Tunisian women victims of domestic violence

R. Jbir^{1*}, L. Aribi¹, W. Abid¹, I. Jbir¹, F. Charfeddine¹, S. Ellouze^{1,2} and J. Aloulou¹

¹Hedi chaker, Hospital, Sfax, Tunisia and ²Hedi Chaker University Hospital, Psychiatry B, Sfax, Tunisia

*Corresponding author.

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Introduction: Violence against women is now widely recognized as an important public health problem with substantial consequences on mental health, that is why health professionals should be identifying, preventing, and responding to violence against women more effectively.

Objectives: To study the prevalence and predictors of anxiety and depression among women victim of domestic violence

Methods: Our study was descriptive and analytical cross-sectional, carried out with women examined in the context of medical expertise, from May until October 2021. An anonymous survey was asked to these ladies. The HADS was used to screen for anxiety and depression

Results: 75 responses were collected The age group of 26–35 years represents the highest percentage 44%. 98.7% were victim of verbal violence, 94.7% of physical violence, 97.3% of psychological violence and 54.7% of sexual violence According to the HAD, anxiety was retained in 72% and depression in 56%. Women who filed for divorce developed more depression ($p = 0.01$). Women with a history of infertility were more anxious than others ($p = 0.025$). Anxiety and depression were significantly correlated with: the husband alcohol ($p = 0.01$) and cannabis consumption ($p = 0.015$). The ladies victims of sexual violence such as an unusual type of relationship developed more anxiety ($p = 0.045$). An history of aggression during pregnancy was a risk factor of anxiety ($p = 0.035$)

Conclusions: Our work has shown the association between violence against women and anxiety-depressive symptoms. The results of our work inspire us to reflect on and develop actions on the scourge of violence against women in a conjugal environment and its psychological repercussions.

Disclosure: No significant relationships.

Keywords: women; Depression; Anxiety; domestic-violence