

higher likelihood of emotional difficulties during surgical treatments, including psychological distress, post-traumatic stress, body shame, and self-blame. A significant number of women, including those in this study, consider the approach to self-image and sexuality in oncology consultations deficient. Psychological programs and interventions should be developed to empower patients to adjust to the sexual changes arising from treatments and disease progression and to promote positive intimate relationships and effective communication.

**Disclosure of Interest:** None Declared

## EPP0249

### Development and psychometric testing of the Acceptability regarding Cognitive Rehabilitation Interventions Survey – Cancer Survivors (ACRIS-CS)

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**Introduction:** Cognitive rehabilitation interventions (CRIs) for cancer-related cognitive impairment (CRCI) have shown promising results. However, the acceptability of CRIs in the context of CRCI treatment has not yet been assessed among cancer survivors. Due to the absence of suitable instruments designed to assess the acceptability of CRIs in this population, we developed the Acceptability regarding Cognitive Rehabilitation Interventions Survey for Cancer Survivors (ACRIS-CS).

**Objectives:** This study aimed to develop and test the psychometric properties of the newly created instrument, ACRIS-CS.

**Methods:** The study was conducted in two stages: (1) the creation of scale items derived from a comprehensive literature review, considering the Theoretical Framework of Acceptability (TFA); and (2) the assessment of the scale's psychometric properties with cancer survivors. At the end of stage 1, the questionnaire was revised by four clinicians and researchers with expertise in the field of CRCI, and the final item selection was determined by the authors, considering redundancy, item relevance, and face validity. The final scale comprised 11 items, answered on a 5-point Likert scale (ranging from "strongly disagree" to "strongly agree"). Higher scores indicated more positive perceptions related to the acceptability of CRIs. Data were collected online and analyzed using IBM SPSS Statistics (version 28.0). Construct validity (exploratory factor analysis, EFA) and reliability (internal consistency) analyses were performed.

**Results:** In this study, 154 cancer survivors were included. The Kaiser-Meyer-Olkin (KMO) measure of 0.847 confirmed the adequacy of sampling (KMO>0.5), and Bartlett's test of sphericity yielded statistical significance ( $X^2(55) = 864.431, p < 0.001$ ),

validating the structure of the correlation matrix. The EFA results indicated the presence of three factors, each with eigenvalues exceeding the Kaiser criterion of 1. The scree plot confirmed the existence of three factors beyond the inflection point. All items demonstrated factor loadings higher than 0.40, indicating their relevance to the identified factors. This factor structure was conceptually justifiable. These factors were labeled as follows: 1) Affective attitude and effectiveness (6 items); 2) Perceived benefits and self-efficacy (3 items); and 3) Perceived burden (2 items). Collectively, these factors accounted for 68.7% of the total variance. The ACRIS-CS total scale and subscales demonstrated good internal consistency, with Cronbach's alpha coefficients ranging from 0.727 to 0.848.

**Conclusions:** The results of the EFA and internal consistency analysis were satisfactory. The ACRIS-CS appears to be a valid and reliable scale for assessing the acceptability of CRIs among cancer survivors.

**Disclosure of Interest:** None Declared

## Others

### EPP0250

#### The dynamics of statistical learning in autism – exploratory research

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**Introduction:** In the context of developmental disorders, it is frequently observed that atypical processes may yield seemingly unimpaired behavioural outcomes. Research has shown that children and adults with Autistic Spectrum Disorder (ASD) have intact statistical learning performance. Recent studies have indicated that learning can happen not only during practice but during ultrashort rests between practice blocks (that is, ultrafast offline learning) but no study to date examined these dynamics in ASD.

**Objectives:** This research aimed to unravel the effect of ASD on learning during and between blocks, also known as online and offline improvement.

**Methods:** We conducted a series of research with three different samples: 1) ASD children (N = 27), 2) ASD adults (N = 42), and 3) neurotypical adults with distinct positions on the autism spectrum, i.e., the severity of autistic traits (N = 174). Participants performed the Alternating Serial Reaction Time task, allowing us to measure statistical learning (the extraction of statistical knowledge) and general skill learning (speed-up regardless of probabilities) separately.

**Results:** Individual differences in online and offline improvements were observed. Results of individual studies further confirmed by

meta-analysis performed on the three above-mentioned datasets show that neither ASD nor the severity of autistic traits influences the dynamics of learning.

**Conclusions:** Our findings suggest that, not only learning but also the dynamics of acquisition of statistical knowledge are intact in autism.

**Disclosure of Interest:** None Declared

## EPP0251

### Factors influencing the health-related quality of life among persons with lower limb amputation wearing a prosthesis

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**Introduction:** Limb amputation is often an unavoidable process in many diseases and accidents, leading to several limitations in social, professional, and recreational activities.

**Objectives:** To explore the perceptions of persons with lower limb amputation (PLLA) wearing a prosthesis regarding the health-related quality of life (HRQoL), and to examine the relationships between HRQoL, body image disturbance, and self-esteem.

**Methods:** The research sample consisted of 91 PLLA who were using a prosthesis. The data were collected through a questionnaire comprised of demographic information and the following scales: The Short Form Health Survey-12 (SF-12), the Amputee Body Image Scale (ABIS-R), and the Rosenberg scale (RSES), in order to assess HRQoL, body image disturbance, and self-esteem respectively. The SPSS statistical software (v.26) was used for the statistical analysis of the data.

**Results:** The mean SF-12 score of the participants was 70.31 (SD=16.74). The HRQoL was affected by the following sociodemographic factors: age, educational level, profession, income, marital status, and parenthood. It was also influenced by disability-related factors, such as amputation cause and years of prosthesis use. In particular, young participants reported a better level of HRQoL than the older participants ( $p<0.001$ ). Participants with a higher education level presented better HRQoL than those with lower education level ( $p<0.001$ ). Unemployed participants and students presented better HRQoL scores compared to all other professional categories ( $p=0.001$ ). However, participants with lower incomes <10,000 € reported a lower level of HRQoL ( $p=0.028$ ). Singles had the highest HRQoL score, while widowers had the lowest ( $p=0.001$ ). Childfree participants experienced the highest level of HRQoL ( $p=0.001$ ). Participants whose amputation resulted from an accident reported a better HRQoL compared to those who had an amputation due to Type 2 diabetes ( $p<0.001$ ). As the years of prosthesis use increase, HRQoL decreases ( $p=0.001$ ). Regarding the associations between HRQoL, body image disturbance, and self-esteem statistically significant relationships were recorded. More specifically, there is a significant positive relationship between RSES and SF-12 ( $p<0.001$ ); as participants' self-esteem increases, so does their HRQoL. Conversely, a statistically significant negative

correlation emerged between SF-12 and ABIS-R ( $p<0.001$ ); as HRQoL increases, body image disturbance decreases.

**Conclusions:** The aforementioned factors should be considered in the design and implementation of psychosocial interventions aimed at recovery. Qualitative studies are recommended to explore the lived experiences of PLLA in-depth.

**Disclosure of Interest:** None Declared

## EPP0252

### Artificial Intelligence in Psychiatry: A New Paradigm

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**Introduction:** The advent of artificial intelligence (AI) and machine learning has sparked interest in its applicability in the mental health domain, offering potential improvements in the efficiency and personalization of psychiatric services.

**Objectives:** To characterize the methodological and technical approaches in studies utilizing machine learning and natural language processing (NLP) within mental health, to evaluate their potential and impact in psychiatric clinical practice, and to address the associated ethical concerns.

**Methods:** A systematic review, adhering to the PRISMA guidelines, was conducted across four primary medical databases. Emphasis was placed on studies that applied machine learning and NLP techniques to psychiatric contexts, extracting data from sources such as medical records and social media.

**Results:** From 327 identified articles, 58 were considered relevant. Major themes included symptom extraction, illness severity classification, therapy effectiveness comparison, and psychopathological insight derivation. Notably, most studies focused on specific populations like social media users, emergency room attendees, or those within medical databases. Methodological findings showcased a preference for efficient classifiers and Python as the primary platform.

**Conclusions:** Machine learning and NLP offer a promising new avenue for psychiatric research and clinical practice, enabling the extraction of previously inaccessible patient information and supporting the decision-making process. However, the field must address inherent limitations, ethical considerations, and ensure that the tools augment, rather than replace, clinical judgment.

**Disclosure of Interest:** None Declared

## EPP0254

### Psychosocial risks in the practice of healthcare professionals: from the culture of stoicism to occupational suicide.

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