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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 selfesteem 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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¹Psychiatry, Centro Hospitalar do Médio Tejo, Tomar; ²Psychiatry, ULSNA, Portalegre and ³Psychiatry, ULSBA, Beja, Portugal *Corresponding author. doi: 10.1192/j.eurpsy.2024.443 **Introduction:** It is well known that healthcare professionals, in a somewhat generalized manner, work in stressful contexts that embrace emotional overload, highly hierarchical environments, and not always sensitive to the vulnerabilities that arise. Chronic professional stress in institutions, associated with the perception of low control and emotional exhaustion, acts as a trigger for eminently deleterious consequences, significantly affecting the most dedicated and perfectionist professionals.

Objectives: This work aims, through a non-systematic literature review, to analyze the psychosocial risks associated with the practice of healthcare professionals, as well as the mitigation strategies whose practical implementation may depend on and maintenance of a positive and protective occupational environment.

Methods: For the purpose of literature review, a search was conducted on search engines such as Google Scholar, Research Gate, and PubMed, with no date limitations, using the following terms (or combinations): "occupational psychiatry"; "psychosocial risks AND healthcare professionals"; "mitigation strategies"; "occupational risk management."

Results: Healthcare sector professionals are the ones reporting exposure to higher levels of workload intensity, including parameters related to work speed (under time pressure), combined with prominent emotional demands and psychological suffering. In addition to the most commonly analyzed occupational stressors (workload, job fatigue, particularly draining emotional interactions, marked cognitive demands, complex decision-making, conflicts of a deontological nature), other relevant contextual factors emerge. Among these, predisposing personality traits (such as neuroticism), a sense of personal sacrifice with neglect of self-care, vicarious trauma, which is intimately related to compassion fatigue in the face of frequent and prolonged exposure to traumatic experiences (of various kinds) of the patients they accompany, and occupational violence, which can manifest as verbal or behavioral threats, mobbing, physical harm, and/or sexual abuse based on a tendentially gender-based and deeply hierarchical structure.

Conclusions: Undeniable consequences such as job dissatisfaction, psychological distress, the development of anxiety, depression, burnout, and post-traumatic stress disorder translate into a loss of capacity to perform occupational functions, with a higher risk of medical/ clinical errors, conferring risks that should never be neglected to the safety of the users of healthcare institutions. On the darker side of this panorama, and in the face of chronic depletion, occupational suicide emerges. It is therefore urgent to requalify the work environment, aiming at creating and maintaining a positive occupational environment, or alternatively, a preventive approach to the risk of mental health problems originating or exacerbated in the workplace.

Disclosure of Interest: None Declared

Promotion of Mental Health

EPP0255

A scoping review of the literature on interventions to reduce stress and burnout among teachers.

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Department of psychiatry, University of Alberta, Edmonton, Canada *Corresponding author. doi: 10.1192/j.eurpsy.2024.444 **Introduction:** Experience of chronic stress among professionals is a risk factor for poor mental and physical well-being. There is limited knowledge regarding the kinds of interventions, and outcomes achieved using different modalities to address stress and burnout among teachers.

Objectives: To undertake a scoping review of recent literature to determine psychological interventions and reported outcomes related to stress and burnout among teachers.

Methods: The PRISMA-ScR (Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for Scoping Reviews was followed. Relevant search terms were used to determine different interventions adopted to reduce teachers' stress and burnout. Articles published between 2018 and 2022 were identified using five bibliographic databases. Relevant articles were extracted, reviewed, collated, and thematically analyzed, and findings s were summarized.

Results: Forty studies conducted in Asia, North America, Oceania, Europe, and Africa, met the inclusion criteria. Sixteen kinds of burnout and stress-reduction interventions were identified. The most popularly studied intervention were Mindfulness-Based Interventions alone or in combination with yoga or Cognitive Behavioural Therapy (CBT), followed by Rational Emotive Behavioral Therapy (REBT). Mindfulness-Based Interventions led to decreased overall Teacher Stress Inventory (TSI) and emotional exhaustion subscale scores. REBT, primarily used with special education teachers, especially in Africa, has also shown positive results. Other interventions reporting positive outcomes include Inquiry-Based Stress Reduction (IBSR), the Stress Management and Resiliency Training Program (SMART), Cyclic Meditation, Group Sandplay, Progressive Muscle Relaxation, Autogenic Training, Sport-Based Physical Activity, Emotional Intelligence Ability Models and Christian Prayer and Prayer-Reflection



