

2018.6-10). The treatment strategy considering the safety and tolerability of KMAP-BP 2022 was developed by collecting opinions from domestic bipolar disorder experts.

Objectives: Safety and tolerability of drugs are very important factors in the treatment of bipolar disorder. An expert opinion survey was conducted on treatment strategies in various special clinical situations, such as significant weight gain, characteristic drug side effects, low drug adherence, pregnant and reproductive women, and genetic counseling.

Methods: A written survey about treatment strategies related to safety and tolerability was prepared and focused on significant weight gain, characteristic drug side effects, low drug adherence, pregnant and reproductive women, and genetic counseling. Ninety-three experts of the review committee completed the survey.

Results: In the case of weight gain occurring during drug treatment, it was preferred to replace it with a drug that caused less weight gain, such as lamotrigine, aripiprazole, or ziprasidone. If there was a significant weight gain due to the treatment drug, it was preferred to intervene as soon as possible. In the case of hyperprolactinemia, it was selected to change the medication and discontinue it for benign rash caused by lamotrigine. In improving drug adherence, the preference for long-acting injections increased. Antipsychotics can be used with great caution in pregnant or reproductive women.

Conclusions: Treatment strategies in various clinical situations related to safety and tolerability in drug treatment for bipolar disorder were described. It is hoped that it will be useful in practical clinical situations.

Disclosure of Interest: None Declared

Intellectual Disability

EPV0546

Implementation in the Motek Caren system with virtual reality of an existing motor rehabilitation programme for people with Down's syndrome in order to increase its effectiveness

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Introduction: Down's syndrome often requires specialized rehabilitation methods in order to effectively improve cognitive and motor functioning. The growing interest in technologies to support rehabilitation is opening up new and promising perspectives for improving the quality of life of people diagnosed with this syndrome. One of these technologies is the Computer Assisted Rehabilitation Environment (CAREN) system from Motek.

Objectives: The aim of the planned research project is to explore the potential of using the CAREN system in the rehabilitation of people with Down's syndrome.

Methods: The study included 10 participants with Down's syndrome (men and women aged 18 to 50 years) without the presence

of organic musculoskeletal disease or other somatic causes impairing motor performance. Before the training test, the participants were assessed by two psychological tests: 1) ACE III - Addenbrooke's Cognitive Examination III Scale (ACE-III), which assesses attention and orientation, memory, verbal fluency, language and visuospatial functions and 2) the TONI 4 Non-Verbal Intelligence Test, which is a test used to measure general intelligence. The tests were carried out using the MOTEK CAREN device, which consists of a treadmill for motor training and a virtual reality screen on which different scenes are displayed for the participant to see during the test. Integrated motion capture technology was used to assess movement capabilities of the patients. The screen displayed different types of applications in the form of virtual reality, in which the participant had to cope with various tasks accommodating different psychomotor skills, for example: crossing a virtual bridge, walking through a forest. The test took about 45 minutes per person. Two training sessions were conducted for each of the 10 patients with a one-month interval between them.

Results: The Motek Caren System has proven to be a promising rehabilitation method for people with Down's syndrome, compared to previous experience with different rehabilitation methods and existing research in the field.

Conclusions: Results emphasize the necessity for further investigations and future research should involve more participants. The project has the potential to integrate modern technology with traditional forms of therapy to improve the quality of life and functioning of people affected by this syndrome.

Disclosure of Interest: None Declared

EPV0547

Quality of life in the people with disability: individual's perception

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Introduction: There are few studies about how people with intellectual disability (ID) perceive their own quality of life (QoL), with research being focus, mainly, in the opinion of caregivers and/or family. Thinking about QoL, the World Health Organization developed an instrument that measures QoL, the WHOQOL. In Brazil, this instrument was adapted, validated and translated for people with ID and their caregivers.

Objectives: The aim of this study was to increase knowledge and understanding of how people with ID perceive their own QoL.

Methods: This study was approved by the Ethics and Research Committee. Sample of 51 individuals aged between 19 and 54 years (G1), with medical diagnosis of ID, who did not present physical/mental disabilities and/or mental disorders and 31 caregivers (G2). G1 answered the WHOQOL-DIS-ID questionnaire and G2 answered the WHOQOL-DISID Proxy questionnaire. The results were statistically analyzed considering p-value \leq 0.05.

Results: The individuals with ID presented higher score on the psychological and lower score in the discrimination domain. The caregivers presented higher scores on the physical and

lower scores in the autonomy domain. Regarding the comparison between self-perception and the perception of caregivers, on Table 1, it was possible to observe significant differences in Psychological, Social, Environmental and all domains for the Disabilities Module.

Table 1. Correlation between Domains

Domain	Mean G1	Mean G2	SD G1	SD G2	Median G1	Median G2	P value
Physical Capacity	72,3	68,8	17,1	19,1	78,5	71,4	0,32
Psychological	80,1	67,7	17,5	17,9	83,3	66,6	<0,01*
Social Relationships	68,8	54,3	22,6	21,6	66,6	50	<0,01*
Environment	73,9	63,3	14,5	18,4	75	68,7	<0,01*
Discrimination	43,1	55,1	25,4	16,7	50	50	0,04*
Autonomy	65,5	41,9	31,4	25,2	66,6	50	<0,01*
Inclusion	77,0	58,9	16,1	20,1	75	54,1	<0,01*

Conclusions: It is critical that people with ID participate in the creation and/or changes of inclusion policies and actions. Since the relationship between the perception of self-reported QoL and reported by caregivers are different and converge only in the physical domain.

Disclosure of Interest: None Declared

Mental Health Care

EPV0548

Aggressive and prosocial behaviors in adolescents from the department of Cordoba, Colombia

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Introduction: Prosocial behaviors are voluntary behaviors that are performed for the benefit of other people and promote harmonious relationships with others. This type of enhanced behavior could reduce physical and verbal aggressive acts in adolescents.

Objectives: analyze the association between aggressive and prosocial behaviors in adolescents

Methods: The study was non-experimental of a transactional - correlational type, two evaluation instruments validated in the context were applied to 500 adolescents attending school in the department of Córdoba. The type of sampling was non-probabilistic.

Results: A Pearson correlation was performed, previously verifying the normality of the data, which showed a statistically significant, negative association between the prosocial behaviors and the aggressive behaviors of those evaluated (Table 1).

Table 1: Correlation between prosocial behavior and aggressive behavior.

		PROSOCIAL BEHAVIOUR
AGGRESSIVE BEHAVIOR	Pearson correlation	-,197**
	Sig. (bilateral)	,004
	N	500

Conclusions: Negative associations were identified between the two variables under study, that is, as prosocial behavior increases, aggressive behaviors could decrease. This finding serves as a basis for carrying out future intervention strategies in adolescents in the department of Córdoba.

Disclosure of Interest: None Declared

EPV0549

Impact of emotional intelligence on anxiodepressive disorders in nursing staff in the intensive care unit

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Introduction: Working in the intensive care unit (ICU) often involves intensely stressful and emotional situations, which can be strong predictors of poor mental health. Healthcare workers are required to perceive, understand, manage, and use their emotions to provide quality care.

Objectives: To evaluate the impact of emotional intelligence (EI) on anxiodepressive disorders in nursing staff in the ICU.

Methods: This was a descriptive, cross-sectional, analytical study conducted among nursing staff in the ICUs of two hospitals in Tunisia. Data were collected over a 3-month period. EI was assessed using the SSEIT self-report test, and the hospital anxiety and depression scale (HADS) was used to measure anxiodepressive disorders. Sociodemographic aspects were also taken into account.

Results: We included 92 healthcare workers. The majority were women (67.4%) with an average age of 25 to 54 years. Nurses represented 58.7% of the study population. About half had less than 5 years of occupational seniority. In terms of lifestyle habits, 76% were smokers, 90.2% did not consume alcohol, and 53% had no leisure activities. The majority had no personal, family, or medical psychiatric history.

The mean EI score was 109.9, ranging from 62 to 150. Anxiety was present in 43.49% of participants and depression in 51.08%.

A significant association was observed between anxiety and the perception of emotions ($p=0.0196$) and the management of others' emotions ($p=0.0261$).

As for depression, a significant association was observed between perception of emotions and depression ($p=0.0259$), as well as between management of others' emotions and depression ($p=0.0126$). EI was positively associated with HADS ($p=0.0281$), with a correlation value of 0.114.