

## EPV0444

**Hindering and facilitating factors in the implementation of digital mental health interventions within community settings**K. Turmaine<sup>1\*</sup> and K. Chevreur<sup>1,2</sup><sup>1</sup>ECEVE1123, Inserm/Université de Paris Cité and <sup>2</sup>ECEVE1123, URC Robert Debré, Paris, France

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1148

**Introduction:** The digitalisation of the society has made inevitable the development and use of digital health. In mental health care, the use of digital tools has been questioned, although their capacity to improve accessibility to evidence-based information and tackle stigma has been recognised. The paradox of these virtual tools is that they need to rely on local resources to get used and disseminated.

**Objectives:** To identify the factors from the context that could help or hinder the set-up of an effective intervention in digital mental health.

**Methods:** Between 2018 and 2020, a digital mental health intervention, based on the promotion of StopBlues, a digital tool targeting psychic distress and suicide in the adult general population, was conducted in 32 willing French localities. In each of the latter, a focal person was designated among the officials to organise the promotion locally and liaise with the research team. Employing interviews and observations, we identified the factors from the context that were favouring or hindering the intervention.

**Results:** The qualitative approach unveiled the existing dynamics between local stakeholders and difficulties faced by the focal persons. It appeared that the political context particularly influenced the outcome of the intervention. In parallel, the endorsement by local hospitals and psychiatrists was equally crucial confirming the key role they play when they champion a cause at the forefront.

**Conclusions:** Real-world evaluations using both qualitative and quantitative methods of digital mental health interventions have to be implemented in order to understand how they can help people. If these interventions are in line with the 1986 Ottawa Charter in terms of patient empowerment, they still need to be supported by local stakeholders, both at the political and medical levels.

**Disclosure of Interest:** None Declared

## EPV0445

**Workplace mental health resilience: usability and impact study of a mental health coping mobile app on a corporate setting**R. Maçorano<sup>1\*</sup>, F. Canais<sup>1</sup>, M. Ribas<sup>2</sup>, M. Parreira<sup>3</sup> and H. A. Ferreira<sup>1</sup><sup>1</sup>Neurosciences, Faculty of Sciences of the University of Lisbon, Lisbon;<sup>2</sup>Psychology and <sup>3</sup>Neuropsychology, NeuroGime, Braga, Portugal

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1149

**Introduction:** Mental health resilience is crucial to professional wellbeing and productivity, being that 57% of company employees are reporting burnout. Additionally, early-stage preventive mental

health interventions are not common, and typically employees only have access to mid-stage professional care.

**Objectives:** The aim of this project is to provide employees with a preventive self-coping tool, enabling open and inclusive care. Specifically, the aim is to assess the receptivity, usability and impact of the usage of a mobile app that provides coping strategies based on positive psychology and a burnout-risk screening.

**Methods:** A mobile app was used with the purpose of being accessible to everyone, independently of their financial capacity. The app also promotes inclusiveness, by aggregating several approaches and methods for mental health coping, which are recommended given the needs of each user. The app was released to a large Portuguese company with 700 employees, in which employees could download it voluntarily.

**Results:** After 7 months, the results showed 37% receptivity rate, 24% improvement on anxiety levels, 36% improvement on workplace wellbeing, 23% increase on mental health self-coping skills, and 21% improvement on burnout-risk levels. These metrics were acquired via app's back-end, self-reporting, and our model for burnout-risk screening.

**Conclusions:** First results showcase the positive impact of adding such a mobile solution to the employees' mental healthcare. Next steps will be conducting a longer study, adding control groups and productivity assessment.

**Disclosure of Interest:** None Declared

## EPV0446

**Investigating LSA - a 'legal high' analogue to LSD, frequently used in the digital realm with relatively unknown effects**

P. Castro\* and J. Maia

FMABC, Santo André, Brazil

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1150

**Introduction:** Psychedelics are substances consumed for recreational use, the majority of these psychoactive substances are illegal and hard to obtain. Therefore, there is a demand for psychedelics legal and easier to access, these types of drugs are called 'legal highs'. LSA (lysergic acid amide) is one of these new psychoactive substances, this drug is searched because it is known to have an effect similar to LSD. LSA has negative effects on body functioning not fully understood by the medical field.

**Objectives:** This project aims to conduct a systematic review of the scientific health literature on LSA.

**Methods:** The following information was included in this review: articles reporting original data on physical effects, neurobiological effects, various bodily symptoms, social and cultural aspects in humans related to LSA, published in English, Portuguese, Spanish, Italian, and French. Studies involving animals, in vitro research, botanical studies, and non-original research were excluded. The following keywords were searched in the PubMed, Google Scholar, and Web of Science databases: (ergine or d-lysergic acid amide or LSA or d-lysergamide or lysergic acid amide). This study followed the PRISMA statement for systematic reviews and PRISMA checklist. The resulting data were tabulated and analyzed according to relevance.

**Results:** LSA, also known as ergine, is an ergot alkaloid with a chemical formula very similar to LSD. Ergine is found in plants of the Convolvulaceae family and is primarily consumed through chewing the seeds of these plants, soaking them in alcohol, or preparing an extract. The amount of LSA in each seed is inconsistent, making it unpredictable how much will be consumed, and these seeds may contain other harmful compounds.

LSA is a partial agonist and antagonist of serotonergic receptors, with a preference for 5-HT<sub>1A</sub> and 5-HT<sub>2</sub>, and stimulation of D<sub>2</sub> is related to nausea. It can cause symptoms including euphoria, hallucinations, anxiety, nausea, weakness, fatigue, tremors, and elevated blood pressure. In some cases, the use of LSA is associated with the use of other drugs, and there are case reports of LSA-induced PRES (Posterior Reversible Encephalopathy Syndrome), post-use suicides and the need for hospitalization due to psychosis-like states.

Studies conducted on the quality of information about LSA on digital platforms indicate misinformation with incorrect data that can be harmful to those who ingest the drug. Additionally, there are studies suggesting that LSA may improve symptoms of cluster headaches.

**Conclusions:** LSA is a legal drug in most countries, with widespread misinformation on the internet and limited control over its use. There are potential serious adverse effects caused by the drug, and it is often associated with other psychoactive substances. Greater knowledge about the drug is needed for diagnosing its use and abuse, as well as for educating the public.

**Disclosure of Interest:** None Declared

## EPV0448

### Psychological intervention online for adolescent: acceptability of Online Emotional Self-Regulation Improvement program

C. López Soler<sup>1\*</sup>, A. Martínez<sup>1</sup>, V. Fernandez<sup>2</sup>, M. Castro<sup>3</sup> and J. L. Vicente<sup>1</sup>

<sup>1</sup>Personality, Assessment and psychological treatment; <sup>2</sup>Medical Psychology and <sup>3</sup>Evolutionary and Educational Psychology, University of Murcia, Murcia, Spain

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1151

**Introduction:** Given that child and adolescent mental health has been affected by several factors in recent years, such as the distance between home and specialized centers that provide psychological care to children, the lack of care resources, or the lockdown caused by the COVID-19 pandemic, online psychological treatments are becoming increasingly common among the child and adolescent population, although it is necessary to develop this type of treatment for children at psychosocial risk, since these have been developed mostly for the general population. To this aim, the Online Emotional Self-Regulation Improvement program (Mejora de la Auto-regulación para Menores, Online MAM@) was developed.

**Objectives:** To assess the acceptability of the Online Emotional Self-Regulation Improvement program, by the adolescent.

**Methods:** The intervention program was applied to a total of n = 32 children (n = 17 girls) between 11 and 15 years of age. The program consists of 7 target emotions to be worked on, and the acceptance, usability, usefulness, enjoyment of each module and

barriers to use by the children were assessed with an adaptation of the Venkatesh and Davis scale. These measures were taken post-test, once the intervention module was completed. The program was applied online for five weeks by the children, and their regular therapists contacted them to provide them with weekly access codes and reminders in case they were not completing the modules.

**Results:** It was observed that the best rated module was the anger module, the most useful module was the sadness module, the module considered to have the highest usability was the fear module, and the most enjoyed module was the sadness module, although all the modules had very high scores above the average and no significant differences were found in the rating of the modules between sexes. As for the most common barriers to use among the children, problems were found with the completion of the intervention, since they often forgot to access the web, and these did not apply what they had learned outside the intervention program.

**Conclusions:** The Online Emotional Self-Regulation Improvement program is the first program developed in Spanish language for adolescents at psychosocial risk, and may represent a breakthrough to consolidate these programs in the national scene and bring the therapeutic possibilities for adolescents to the same level as in other parts of the world. Focusing on future versions of the program, it would be advisable to reduce its length and incorporate activities outside the treatment program to guarantee a generalization of what is learned in the intervention program in everyday life situations.

**Disclosure of Interest:** None Declared

## EPV0449

### A study of the personality trait-focused digital mental health intervention

S. Jeong<sup>1</sup>, H. Kim<sup>1</sup>, S. K. Lho<sup>2</sup>, S. Mun<sup>2</sup>, I. Hwang<sup>2</sup>, S. Kim<sup>2</sup>, H. Lim<sup>2</sup>, H. Kim<sup>1</sup>, W. Moon<sup>2</sup> and M.-S. Shin<sup>1,3\*</sup>

<sup>1</sup>Psychiatry, Seoul National University Hospital; <sup>2</sup>40FY inc and <sup>3</sup>Seoul National University College of Medicine, Seoul, Korea, Republic Of

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1152

**Introduction:** Mental healthcare services that address a variety of primary complaints which are highly related to maladaptive personality traits among the general population are important to prevent developing psychiatric disorders.

**Objectives:** This study aimed to examine the effectiveness of a digital mental health service (named “Mindling”) that focuses on maladaptive personality traits in the general population.

**Methods:** Participants were recruited through a South Korean community website and screened for adults between the ages of 18 and 60 in terms of personality traits such as perfectionism, low self-esteem, social isolation, or anxiety. Participants were allocated to four intervention programs (Riggy, Pleaser, Shelly, and Jumpy) based on their screening results and were randomly assigned to digital treatment and waitlist groups. Each intervention program was conducted online for 10 weeks. The primary outcomes were all measured by self-report questionnaires; in addition to stress levels, each program included measures of perfectionism (Riggy), low self-esteem (Pleaser), loneliness (Shelly), and anxiety (Jumpy). The secondary outcomes included self-efficacy, depression, and other