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need for further research and potential review for grading above Class B in the Misuse of Drugs act 1971.

Working with a Patient With Personality Disorder: A Case Report and Reflection on My Experience

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Aims. Emotionally unstable personality disorder (EUPD) accounts for up to 20% of diagnoses in the inpatient psychiatry population. The assessment, diagnosis, and treatment of any personality disorder may be challenging, and its classification remains debatable. Here I will describe a case of a dual diagnosis of EUPD and schizotypal personality disorder. Through the case report I will also reflect on my first experience of working with a patient with personality disorder, as a Psychiatry Foundation Fellowship doctor with little previous exposure to the psychiatry specialty.

Methods. The patient was a female in her thirties, previously diagnosed with EUPD, who had not benefitted from a number of psychological treatments. She had a history of suicidal behaviour and previous admissions but presented differently this time. She had short hair that was dyed in a vivid colour, was paranoid that she was being spied upon from an alternative universe and had suicidal plans to join the alternative universe. She also had auditory and visual hallucinations. On exploration it became apparent that she had similar episodes in the past, each lasting no more than a day. An additional diagnosis of schizotypal personality disorder was made, and she responded well to risperidone. Unfortunately, she was transferred to another ward for bed management reasons, whereupon the diagnosis reverted to EUPD and antipsychotics were stopped.

Results. This case highlights how in mixed personality disorders, features of one personality disorder may be more predominant than another at different times. It also contradicts the notion that people with schizotypal personality disorder rarely present to mental health services. The inconsistency of diagnosis and lack of continuity of care caused immense distress to the patient, prolonging the acute episode. This highlights the importance of a good formulation in order to tailor care for the patient.

Conclusion. As a newly qualified doctor, working with patients with personality disorders was a meaningful experience. Through ward rounds and the seemingly trivial conversations along the corridor, I thought about the effect of transference and countertransference for the first time, which is applicable to any interpersonal interaction. I witnessed the harm caused by the lack of continuity of care. I reflected on the intricate balance between the advantage of establishing a diagnosis for the patient, and the drawback of the diagnosis leading to labelling. It made me face the stereotypes I held and allowed me to learn about the patient as an individual.

Prevalence of Burnout in Intern Doctors on a Compulsory Rotational Internship in the Aftermath of the 2nd and 3rd Wave of COVID-19, Conducted in a Tertiary Hospital in Kolkata, India for the Academic Year 2021–2022

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Aims. Intern doctors are the backbone of the hospital infrastructure. While they are the first to provide patient care on an Emergency and Elective basis, they also happen to be the junior most. The interns of the year 2021-2022, apart from working in various departments of the hospital, were also the frontline workers in the 2nd and the 3rd wave of the COVID-19 pandemic. In the current global public health crisis, interns are more exposed to physical and mental exhaustion, owing to being overworked, along with carrying the burden of loss of patients, colleagues, and potentially infecting themselves and their loved ones to COVID-19. Burnout, a psychological syndrome that occurs due to work-related stress, includes emotional exhaustion (EE), depersonalisation (DP), and a sense of reduced personal accomplishment (PA). Intern doctors run a high risk of facing burnout the prevalence of which is yet unknown. Hence, the survey was conducted.

Methods. An online survey was carried out using MASLACH BURNOUT INVENTORY (MBI) among interns with their voluntary participation. 22 symptom items pertaining to occupational burnout were assessed, with three-component scales: emotional exhaustion (9 items), depersonalisation (5 items), and personal achievement (8 items), with a 7-level frequency scale for all MBI scales and 0-6 scoring.

Responses were received from 180 interns (n = 180). Questions regarding current department postings and contraction of COVID-19 were included in the survey.

Results. Burnout was prevalent in most interns who tested positive for COVID-19 = 60% (108), followed by those whose family members tested positive for COVID-19 = 23.8% (43).

Burnout was seen more in female interns = 30% (54) than in males = 10.56% (19).

Burnout was seen more in interns working in the Emergency and Trauma = 41.67% (75), and the least in Ophthalmology = 1.67% (3). **Conclusion.** Burnout is significantly prevalent in intern doctors at the end of the academic year, especially due to the COVID-19 pandemic. Burnout can lead to increased medical errors, reduced patient satisfaction, which affects the quality of patient care. Understanding risk factors, improving workplace environment, limiting duty hours, workshops promoting healthy behaviours have been suggested to reduce burnouts and to prioritise both mental and physical health of interns so as to ultimately improve patient care.

Trauma-Informed Care on CAMHS ID Unit. Case Study of a Child with Neurodevelopmental Disorder and Self-Injurious Behaviour

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Aims. Crystal House is a specialist CAMHS ID inpatient 5-bedded unit based in the Kingswood Centre, North West London - for children aged between 13 and 18 years with primary diagnosis of Intellectual Disabilities with or without additional concerns that warrant admission to hospital for purpose of assessment and management. Reporting this case, we wanted to highlight