EPV0487

TELEPSYCHOLOGY WITH ITS INNOVATIONS IN PSYCHOTHERAPY AND PSYCHODIAGNOSTICS

I. S. Lancia[1]*, G. M. Festa[1,2], M. L. Sisinna[1] and M. Ciarrocchi[1]

[1]Interdisciplinary Institute of Higher Clinical Education (IAFeC) and [2]Pontifical Faculty of Educational Sciences «AUXILIUM», Rome, Italy
*Corresponding author.
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Introduction: The types of Electronic-Based Therapy & Intervention are spreading rapidly, especially after the onset of COVID, and several authors are dealing specifically with digital psychology and psychiatry, implementing new techniques and methodologies (Festa, Martinotti, 2022).The latest technological innovations related to metaverse and holography are emerging as new digital mediums and a reflection on their potential in the psychological field is urgent. Telepsychology, which currently uses text, audio and video-based communication as a medium, will see the way to relate to the patient with the "new digital presence" amplified at 360 degrees. This will of course revolutionize some aspects of classic psychological intervention: "physical proximity" will have a completely different meaning. New technologies through the digital medium have the power to cancel space, thus allowing the intervention to be separated from the sharing of the same physical environment. The first great epochal upheaval produced by new technologies in the field of the psychological profession is precisely this: psychological intervention no longer necessarily coincides with the sharing of the same physical space, space and intervention becoming independent.
Objectives: We will soon and increasingly refer to associations, national and international professional associations and institutions that deal with the subject, such as the American Psychological Association, the International Society for Mental Health Online, the Online Therapy Institute, to have guidelines on best practice with respect to psychological performance online. This will be accompanied by specific training courses for clinicians who decide to work using technological tools and courses related to telepsychology and the development of a professional online identity.
Methods: Holographic technology will revolutionize our "internal and external world", and it is the task of psychological science to cultivate questions and provide answers both on the impact that this technology will have on the life of the average man and on the possibilities of use for our profession. The distance of the real world from the digital one is getting smaller with each passing day.
Results: Our habits, our way of working, having fun have changed in different ways and in a very short time. Our physical, cognitive and sensory boundaries have expanded and our way of life has "evolved".
Conclusions: We find ourselves passing through and going through a phase, which began in the 1980s, which is not without shadows and settles into mass cultural aspects. The contradictions, abnormal uses and abuses of technology, but which accompany every innovative transformation and which we should gradually manage wisely, are also typical of this phase. We will see what the future holds!

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Mental health information-seeking behaviors and e-health literacy in Tunisian community adults

L. S. Chaibi[1]*, F. Fekih-Romdhane[1], C. Ben Said Saffar[2], W. Cherif[1] and M. Cheour[1]

[1]Psychiatry E and [2]Forensic Psychiatry, Razi Hospital, Mannouba, Tunisia
*Corresponding author.
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Introduction: Due to the convenient and easy access to the Internet, there is an increasing tendency to seek online health information instead of formal help-seeking. To date, there is a very little amount of research on online help-seeking behaviors for mental health problems, with no studies having been performed in Tunisia.
Objectives: We aimed to explore mental health information-seeking behaviors and e-health literacy in a sample of Tunisian community adults.
Methods: We performed a cross-sectional descriptive study among adults from the general population. All participants were administered the Barriers to Access to Care Evaluation scale (BACE-30), the Columbia Suicide Severity Rating Scale (SIS-5), the Depression Anxiety Stress Scales (DASS-21), and the eHealth Competency Scale (eHEALS).
Results: A total of 44.2% participants reported having searched the Internet for mental health-related information during the last 12 months. Google was the most used tool by participants when searching for mental health related information. The main topics searched were symptoms and management (n=49%), followed by finding a diagnosis (n=47%), researching for medications and physicians (n=41%). We conducted a multivariate analysis to identify factors related to participants' e-health literacy. A higher depression score (p=0.037), lower levels of education (p=0.011), and perceived barriers to access to care (p=0.004) were substantially linked to worse e-health literacy.
Conclusions: While a high proportion of participants reported mental health information-seeking behaviors, those with higher depression and who perceived more barriers to care access exhibited lower e-health literacy. These findings may have practical clinical implications.

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Clinical implementation of the smartphone app Robin Z as an additional treatment tool to support adolescents with psychiatric symptoms

N. Traber-Walker*, E. Voets, C. Bühlmann, M. Gerstenberg, F. Probst, M. Franscini and S. Walitza

Department of Child and Adolescent Psychiatry and Psychotherapy, University of Zurich, Zurich, Switzerland
*Corresponding author.
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Introduction: Interest in the development of innovative technologies in the health sector has increased due to their potential to improve accessibility, efficacy, quality, and cost-effectiveness of

treatment. Based on these considerations, we developed the app Robin Z to support adolescents in psychiatric treatment. Robin Z is intended as an add on therapy-tool. It aims to assess symptoms in real time, offer help in coping with symptoms and everyday life and to support medication adherence. Despite initial encouraging research findings supporting the use of smartphone technology in psychotherapy, it remains unclear whether the consistent use of smartphone technology in outpatient clinics is practical outside of research projects. Thus, it is uncertain whether patients will engage with this technology over an extended period of time and whether clinicians will be willing to integrate this new technology into their routine. In view of these factors, it is crucial to evaluate the use of smartphone apps for their applicability, effectiveness, and efficiency in clinical routine. In our investigation, we want to address these questions and fill the gap between research and clinical practice.

Objectives: The aim of our evaluation is to identify barriers in clinical implementation plus to assess the usability and applicability of the Robin Z app in clinical practice.

Methods: We started the clinical implementation of Robin Z in four community-based outpatient services. We collected data of 27 adolescent patients and their caregivers (N=15) over a six-week period. They all completed questionnaires on user-friendliness and satisfaction. Further, user data about mood logs, symptom trajectories, achieved weekly goals and entries for positive reinforcement were gathered to examine the clinical impact of using the app.

Results: The clinical implementation and evaluation will provide data on feasibility, user-friendliness, clinical implication and satisfaction of patients and therapists with the smartphone app Robin Z.

Conclusions: Although many apps are available for young people with mental health problems, most of these have not been developed by professionals, and their effectiveness has not been evaluated. To the best of our knowledge, Robin Z is one of the first apps of its kind to be specifically developed by clinical experts as an additional tool to support psychotherapy for adolescent patients. The results of this evaluation are of clinical importance to the field of eMental Health. They will provide preliminary evidence of the clinical utility of the app. In addition, the results will improve our understanding of potential barriers and facilitators to using Robin Z for both patients and therapists.

Disclosure of Interest: None Declared

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Deprexis® Acceptability study in REal life (DARE): study design

O. Amiot[1]*, A. H. Clair[2], P. Courtet[3], E. Fakra[4], V. Narboni[5], F. Gheysen[6], E. Haffen[7], D. Drapier[8] and L. Lecardeur[9]

[1]Groupe Hospitalier Paul Guiraud, Boulogne Billancourt; [2]ICM - Paris Sorbonne Université, Paris; [3]CHU, Montpellier; [4]CHU, Saint Etienne; [5]Ethypharm Digital Thérapy, Paris; [6]cabinet libéral, Caen; [7]CHU, Besancon; [8]CH Guillaume Regnier, Rennes and [9]consultant, Nice, France
*Corresponding author.
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Introduction: Depression is a leading cause of disability, worldwide. Recently, WHO highlighted the negative impact of recent crises (COVID-19 pandemic, war in Ukraine, economic crisis).

Although most international guidelines recommend psychotherapies as first-line treatment of depression, access remains scarce in France due to limited availability of trained clinicians (notably those with CBT certification), high cost for patient in a context of non-reimbursement and fear of stigmatization (Coldefy M. HCAA, 2022/04,19). Therefore, online blended psychological treatment such as deprexis® could increase access to care for people with depression. It presents several advantages such as easy access, scalability, and a proven efficacy (Twomey et al. PLoS One. 2020;15(1):e022810).

Objectives: This study aims to test real-life acceptability of deprexis® for people with depression in France outside a reimbursement pathway.

Primary objective of this cross-sectional study is to measure acceptability of deprexis® a new digital therapy in France.

Questionnaire includes acceptability of deprexis® assessed with patient willingness to complete deprexis® course, reasons of refusal, when needed, demographics and depression characteristics.

The secondary objectives are to study 1/ acceptability according to type of center (Hospital based, Community Based or private practice) and type of practitioners (psychiatrists or psychologists), 2/ differences in acceptability according to severity's level (evaluated with PHQ 9), 3/ differences in acceptability according to administration or not of a treatment (including psychotherapy), 4/ differences in acceptability according to prescriber's profile (age, sex, place and type of practice), 5/ identification of reasons for refusal , and 6/ analyze refusal rate over time.

Methods: DARE is as a cross-sectional study in which deprexis® is suggested to any patient meeting the inclusion criteria over the fixed inclusion period June-December 2022

Inclusion criteria are: 1/ depression, 2/ age between 18 and 65 years, 3/ speak French sufficiently, 4/ access to Internet with a device to connect to deprexis® platform.

Exclusion criteria are diagnosis of bipolar disorder, psychotic symptoms and/or suicidal thoughts during the current episode.

All investigators received a video-based training on deprexis® before inclusion to make sure they all have same level of information and understanding on the program.

Results: The study is currently recruiting. Data will be available for EPA congress.

Conclusions: It is a first time a digital therapy is completing current therapeutic options for the treatment of depression in France. Acceptability of this innovation by both patients and Healthcare providers is a first step.

DARE may allow to have a better understanding of the acceptability of a digital therapy in the treatment of depression in France and identify the different factors influencing it in a natural setting.

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