

Conclusions: This study highlights a higher prevalence of CPI and CPM in individuals with PD compared to the general population. Factors such as higher PD severity, increased Negative Affectivity, and poorer reflective functioning were identified as predictors of CPM. These findings underscore the necessity for integrated healthcare approaches to address the multifaceted needs of PD patients, emphasizing the importance of considering both mental and physical health in treatment strategies.

Disclosure of Interest: None Declared

O0090

Relationship between Early Maladaptive Schemas and DSM-5 Pathological Personality Traits from a Dimensional Diagnostic Approach

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Introduction: In DSM-5 Section III, the Alternative Model for Personality disorders (AMPD), a dimensional approach for conceptualization and diagnosing complex character problems was introduced. Based on recent findings, AMPD aligns well with the theory of Young's Schema Therapy (ST). ST seems to offer a valuable clinical framework that complements the empirically based AMPD, which is not built upon a certain theory of psychopathology.

Objectives: The aim of the current study was to explore the association between early maladaptive schemas (EMSs), DSM-5 pathological personality traits and certain psychological symptoms to gain a better understanding of their relationship and highlight the connection points between AMPD and the theory of ST.

Methods: A total of 490 Hungarian participants, including 98 males, took part in the cross-sectional research, with an average age of 26.9 (SD = 9.34). All participants completed the short form of Young's schema questionnaire (YSQ-S3), the brief form of PID-5 (PID-5 BF) and the revised version of the Derogatis Symptom Checklist (SCL-90 R).

Results: Results of a series of hierarchical regression analyses found that all five schema domains were able to predict psychological symptoms and DSM-5 pathological personality traits at a statistically significant level. Moreover, in accordance with our data, specific EMS patterns are associated with different psychological symptoms and pathological personality traits. Ultimately, we identified two EMSs, namely Negativity/Pessimism and Insufficient Self-control, which predicted all of our dependent variables.

Conclusions: Our findings suggest that the relationship between EMSs and DSM-5 pathological personality traits goes beyond the established fact that EMSs, like any other indicators of personality problems are associated with psychopathological symptoms and traits. This is supported by the fact that we could link specific EMS patterns to the pathological personality traits and psychological symptoms that we investigated. We believe that our results contribute to the clinical utility of AMPD, by assisting the creation of schema profiles tailored to personality pathologies, thereby facilitate the diagnostic process and the development of

schema - focused interventions. Furthermore, it seems that the identified EMSs, Negativity/Pessimism and Insufficient Self-control play a special role in relation to pathological personality traits and psychological symptoms and should be considered with particular emphasis in terms of risk group classification and vulnerability.

Disclosure of Interest: None Declared

COVID-19 and related topics

O0091

The Effect of a Virtual Reality Counseling Program Based on Metacognitive Therapy in Reducing Post-Traumatic Stress Disorder among Those Recovering from Covid-19

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Introduction: Many COVID-19 survivors who were attacked and suffered severe symptoms of the virus have suffered from post-traumatic stress disorder (PTSD) which persists for long periods. These people need treatment to alleviate the severity of these disorders. Metacognitive therapy (MCT) is one of the modern therapeutic trends in psychological counseling, which focuses on the nature of the thought rather than on identifying and changing the thought as in other cognitive therapies. It is also concerned with whether people possess an aspect of reflective awareness and aims for a broader understanding of the way the mind works. Working on the process of metacognition, that is, the individual's thinking about what he knows, being aware of his thoughts, and constantly monitoring and organizing them, helps reduce anxiety disorders and mood swings, and this will reduce psychotic disorders.

Objectives: The current study aims to identify the effect of a virtual reality (VR) counseling program based on MCT in reducing the severity of PTSD among survivors of Covid-19. It also examines the continuity of the effectiveness of this program in reducing these disorders.

Methods: The quasi-experimental method (two group design) with experimental and control groups with a pre-posttest and a follow-up test was adopted. The sample for the current study consisted of 60 COVID-19 survivors suffering from PTSD. The PTSD scale was applied online to a group of people recovering from Covid-19 from the Arab Republic of Egypt. Then those who had high scores were selected, contacted and their consent was obtained to apply a virtual reality counseling program to them. The counseling program was implemented via virtual reality technology, and consisted of 20 counseling sessions, each session lasted between 60-90 minutes. The program continued for two months, with two sessions per week.

Results: The results of the current research revealed a significant improvement in the experimental group through a significant reduction in their post-traumatic stress disorders. The results also showed the effectiveness of the counseling program based on metacognitive therapy in reducing the manifestations of post-

traumatic stress disorders in those recovering from Covid-19. The results confirmed the continuing effect of the program after the follow-up period.

Conclusions: Using metacognitive therapy has an effective effect in reducing post-traumatic stress disorder, and it can be used with many psychologically disturbed people.

Disclosure of Interest: None Declared

O0092

Prevalence of Prolonged Grief Disorder and Related Clinical Factors During the COVID-19 Pandemic in Turkey

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Introduction: Prolonged grief disorder has recently been added to the Diagnostic and Statistical Manual of Mental Disorders 5, Text Revision. To understand the health burden and then allocate economic and professional resources, it is necessary to provide epidemiological data for this new disorder. More information on the characteristics of people suffering from PGD is also beneficial to better identify individuals at risk.

Objectives: This study, therefore, aimed to estimate the prevalence of the PGD criteria in a special period such as the Covid-19 pandemic and in a representative population-based sample, evaluate the sociodemographic, and loss-related correlates of PGD case-ness and explore possible predictors.

Methods: The study included 126 people (97 females/29 males) who lost a relative for any reason during the Covid-19 pandemic period (March 2019-January 2022) in Turkey. We used self-reported data from participants who all completed questions on socio-demographic and loss-related characteristics plus Hospital Anxiety and Depression Scale (HADS), Prolonged Grief Disorder Scale (PG-13), Multidimensional Scale of Perceived Social Support (MSPSS), Adult Separation Anxiety Questionnaire (ASA-27).

Results: Median age was 34 years, range (18-63); 12 participants were diagnosed with PGD (9.5%). No difference was detected between deaths due to COVID-19 and its complications and deaths due to other causes in terms of PGD diagnosis and PGD symptom severity. When we divide the participants into two groups according to PGD diagnosis (PGD and nonPGD): The average age of the PGD group was higher ($Z=-2.068$; $p=0,31$) and they had more additional medical conditions ($\chi^2=7.21$; $p=0,007$). Thoughts of guilt were more common in the PGD group ($\chi^2=7.92$; $p=0,005$). Additionally, HADS-total, HADS -depression, HADS -anxiety and ASA-27 were higher in the PGD group (respectively: $Z=-4.047$; $P=0,00$, $Z=-4.209$; $P=0,00$, $Z=-3.437$; $P=0,001$, $Z=-1.975$; $P=0,048$). PGD occurred most frequently after first-degree losses ($\chi^2=13.67$; $p=0,00$) and was inversely proportional to the age of the loss ($Z=-1.979$; $P=0,04$). In the nonPGD group, the rate of believing in any religion ($\chi^2=5.807$; $p=0,016$). and the level of fulfilling the requirements of the religion were

higher ($\chi^2=10.584$; $p=0,05$). In the linear regression analysis examining the predictors associated with the severity of prolonged grief; the deceased person was a first-degree relative ($t= 6.23$; $p<0,001$) and younger in age ($t=-3.71$; $p<0,001$), the presence of guilt ($t= 3.28$; $p=0,001$), and increased separation anxiety ($t= 4.13$; $p<0,001$) and depression scores ($t= 4.29$; $p<0,001$) were significant boost of prolonged grief severity.

Conclusions: Although higher PGD rates were expected in deaths due to Covid-19 compared to deaths due to other causes, we did not detect any significant difference in this study. However, this study identified some possible predictors associated with PGD.

Disclosure of Interest: None Declared

O0093

Physical healthcare gap among patients with severe mental illness through the COVID-19 pandemic. Preliminary results from a real-world investigation in Lombardy, Italy

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Introduction: Patients suffering from mental disorders tend to be less adherent to the recommended therapies. Moreover, the COVID-19 pandemic had a global impact on physical and social well-being, which turned out stronger in the most fragile patients, like those with a mental condition.

Objectives: To assess whether the COVID-19 pandemic influenced the physical healthcare gap between patients with and without severe mental illness (SMI) treated for chronic conditions.

Methods: Data were retrieved from Healthcare Utilization Databases of Lombardy region (Italy). Prevalent users of antihypertensive drugs, statins or antidiabetic drugs, receiving healthcare in Lombardy during 2020, were identified. Among them, those with a previous diagnosis of schizophrenic or bipolar disorder were selected and matched with up to 3 patients without any sign of mental disorder by sex, age and number of contacts with the NHS during the previous year. 3 cohorts (not necessarily independent) were formed.

High adherence to specific recommended drug therapies and discontinuation during 2020 were evaluated.

Association between presence of SMI and high adherence was evaluated by using a log-binomial model (risk ratios, RR with 95% CI); a Cox model (hazard ratios, HR) was used for discontinuation.

As comparison, same analyses were performed to the cohorts of prevalent users in 2019, to evaluate the impact of the COVID-19 pandemic. Results were stratified according to the type of mental disorder.

Results: 36'436, 14'136 and 12'597 prevalent users of antihypertensives, statins or antidiabetics respectively were identified, of which 25% with SMI (9'109, 3'536 and 3'152 respectively).