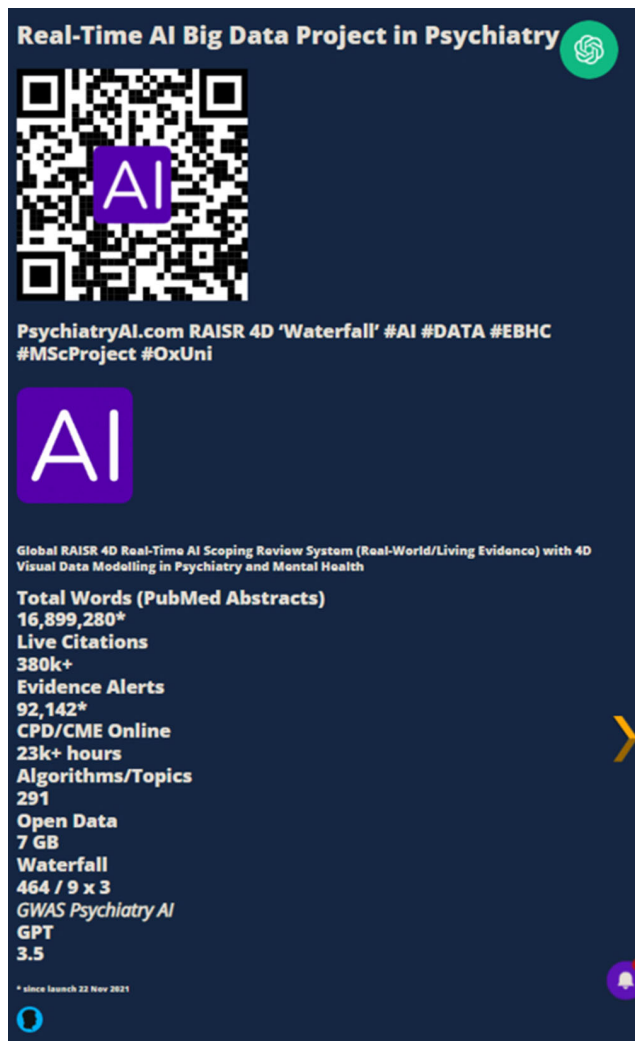**Image 3:**

Conclusions: Psychiatryai.com has successfully developed a novel AI and DS platform that incorporates the latest research in mental health and psychiatry, providing real-world evidence (RWE) for psychiatrists and healthcare professionals worldwide, along with CPD/CME online. This enhances hypothesis testing in research by presenting a related Evidence Matrix and Blueprint (from the last 365 days) for each evidence node on the site (RAISR 4D). These matrices provide a real-time visual table (8 x 8 / 64) of global research related to the evidence node in the preceding year. The site is VR-ready and has a special focus on AI and Psychiatry, Disaster and Traumatology Sciences, and Youth Mental Health. This project is dedicated to the memory of Dr Denis O'Leary and Dr Navin Venkatraman.

Disclosure of Interest: None Declared

EPP0190

Community Mental Health in Postgraduate Education of Psychiatrists and Public Health Professionals- A Proposal for a New Subspeciality

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Introduction: "Community Mental Health (CMH)" is defined as policies and practices aimed at improving mental health of communities and promoting healthy societies. Community mental health issues require a multidisciplinary approach because of their complex pattern, in which social determinants play a direct role in both their causes and solutions. However, training of healthcare professionals on CMH issues is still inadequate in many countries.

Objectives: The purpose of this study was to assess mental health and public health professionals' awareness on CMH, as well as their opinion on the quality of their postgraduate education on CMH in Türkiye. The findings of this study are expected to provide guidance for the improvement of postgraduate education programs of psychiatry and public health.

Methods: The descriptive quantitative study was conducted with psychiatrists, public health physicians, and nurses with a postgraduate degree in Public Health or Psychiatric Nursing, who voluntarily participated by completing an online questionnaire. Data from a total of 131 physicians (43.5%) and nurses (56.5%) were analyzed by using the SPSS statistical package, where descriptive statistics, chi-square, t-test, and ANOVA were used.

Results: The majority (65.6%) of participating physicians and nurses were employed in tertiary healthcare institutions, with the remainder working in other healthcare settings. While half of the healthcare professionals had CMH topics embedded in their postgraduate education curriculum, only 40% had practical training in Community Mental Health Centers. Only one third (37.4%) expressed confidence in their knowledge of CMH, while only one participant reported feeling adequately informed about CMH services at the central and provincial level in Türkiye. One-third of the participants suggested CMH to become a subspecialty for health professionals, emphasizing the need for dedicated theoretical and practical courses in postgraduate curricula of public health and psychiatry education. The study also highlighted a significant difference between nurses and physicians regarding their postgraduate curriculum and perceived knowledge on CMH.

Conclusions: The study revealed that postgraduate education on CMH is still limited in Türkiye, with more emphasis of CMH in psychiatric nursing education. The findings indicate that education programs need to be revised to include more practical training,

including practicum in Community Mental Health Centers and that CMH can potentially become a subspecialty for public health professionals and psychiatrists. Conducting more comprehensive quantitative and qualitative studies on this subject, and enriching existing postgraduate education programs in terms of Community Mental Health, are of great importance for protecting and promoting community mental health.

Disclosure of Interest: None Declared

EPP0191

Motivation to Motivate: Pilot of motivational interview training in a tertiary university hospital

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Introduction: Motivational interviewing (MI) is an evidence-based communication style that is effective in facilitating behaviour change and patient engagement. Originally developed in the field of addiction, MI can be applied to address a range of health behaviours including smoking cessation, medication adherence and diabetes and weight management. Given its demonstrated efficacy, training clinicians in medical and psychiatry specialties in MI has potential to enhance patient outcomes.

Objectives: 1. Enhance awareness and understanding of the basic concepts and methods of MI among NCHDs (Non-Consultant Hospital Doctors) and hospital staff.
1. Assess the perceived effectiveness of the training and help foster a culture of teaching and learning within the hospital.

Methods: MI training was organised by the psychiatry department and delivered by a certified external trainer. The training was structured into 2 sessions, each lasting three hours, with a six-week gap between sessions. The training was integrated into the regular academic teaching for psychiatry trainees and a circular email invite was sent to the medical NCHD cohort and psychology department. Pre and post-training questionnaires were collected from participants with five-point Likert scales used to gather responses

Results: There were 40 attendees across the two sessions. In total, 25 questionnaire responses were collected for the pre training (62.5%) and 30 responses were collected post-training (75%).
Prior to training 48% (12/25) indicated they were familiar with MI, 48% felt confident in using MI and 88% (22/25) felt it was applicable to their practice. Post-training, 73% (22/30) felt confident in using MI, 90% (27/40) felt MI was applicable to their practice and 100% indicated they would use MI in their practice. The perception of applicability (p=0.011) and likely utilisation of MI skills (p<0.001) significantly increased over the course of the training as measured by paired t-test (n=23). Ninety-seven percent of responders stated they would recommend the training and 57% (17/30) indicated that they would use MI on a weekly basis in the future.

Conclusions: NCHDs and other staff welcomed this training and indicated the training was relevant to their practice. MI demonstrated a positive effect on staff perceptions of applicability and future utilisation of MI skills. Increasing clinician self-perceived efficacy through training events may help contribute to a culture of learning and teaching in hospital settings.

Disclosure of Interest: None Declared

Suicidology and suicide prevention

EPP0192

Transcranial Magnetic Stimulation and its Efficacy in Alleviating Depressive Symptoms in Patients with Suicidal Ideation

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Introduction: Suicide is a global public health issue. According to the latest available data from the National Institute of Statistics, 4,003 people died by suicide in 2021, reaching a new historical high. Approximately 90% of suicide victims suffer from one or more severe psychiatric disorders, and there is a documented 20-fold higher risk of suicide in individuals with affective disorders compared to healthy subjects (Abdelnaim et al., 2020). Repetitive transcranial magnetic stimulation (rTMS) has been established as an effective alternative or complementary treatment option for patients with depressive disorders, but little is known about its effects on suicide risk.

Objectives: To assess the efficacy of rTMS in reducing depressive symptoms in patients with suicidal ideation and behaviors.

Methods: Population and Methods: A retrospective analysis was conducted on a sample of 28 psychiatric patients (23 females; mean age 49.36 ± 16.23) with suicidal ideation identified by item 3 (suicidality) of the Hamilton Depression Rating Scale (HDRS), who were treated with rTMS. All patients received a minimum of 30 sessions, consisting of the application of a high-frequency (>10Hz) or intermittent theta burst stimulation (TBS) over the left dorsolateral prefrontal cortex (DLPFC) at an intensity of 120% of the resting motor threshold (RMT), and repeated low-frequency pulses (1Hz) or continuous TBS over the right DLPFC with an intensity of 110% of the RMT.

Results: Results: The results show a statistically significant improvement in depressive symptoms following rTMS intervention ($p < 0.001$). Furthermore, remission was observed in 46% of the sample (HDRS < 8).

Conclusions: Discussion: In line with recent studies (Abdelnaim et al., 2020; Hines et al., 2022) and systematic reviews (Cui et al., 2022; Bozzay et al., 2020) on suicidal ideation in the context of psychiatric disorders, the findings of this study demonstrated that rTMS achieved satisfactory results in reducing depressive symptoms and suicidal ideation.
Conclusions: This clinical study indicates preliminary promise for the prevention of suicidal acts and underscores the need for more detailed and specific research on rTMS in the field of suicide.
Keywords: rTMS, neuromodulation, depression, suicide.

Disclosure of Interest: None Declared