O0011

Association of early traumatic experiences of sexual abuse with well-being, self-esteem, resilience and close relationships during adulthood

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Introduction: There is evidence that early traumatic experiences may have a negative impact on critical components of psychosocial adjustment, while they may also adversely affect mental health during adulthood.

Objectives: The aim this study was to investigate the association of early traumatic experiences and in particular sexual abuse with well-being, self-esteem, resilience and close relationships during adulthood.

Methods: The study included 499 individuals (76.2% women), with a mean age of 24.2 years. Participants completed Early Trauma Inventory-Short form for early traumatic experiences' assessment, Brief Resilience Scale for resilience evaluation, Mental Health Continuum-Short Form to assess well-being and Experiences in Close Relationships-Revised scale for adult romantic attachment assessment.

Results: The majority of participants (98.2%) responded positively to at least one statement related to early traumatic experiences while 235 individuals (47.1%) reported that they had experienced sexual abuse. Furthermore, individuals who had experienced sexual abuse displayed lower levels of well-being (p<0.001), self-esteem (p<0.001) and resilience (p<0.001), but higher levels of anxious adult attachment (p<0.001) compared to individuals without such traumatic experiences.

Conclusions: The findings of the present study highlight the importance of timely detection and holistic and integrated management of psychological needs of individuals who have experienced early traumatic experiences and especially sexual abuse.

Disclosure of Interest: None Declared

O0010

Obesity in secure hospital settings: Changes in BMI over time among a complete national cohort of forensic in-patients in Dundrum Hospital, Ireland

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Introduction: There are high rates of treatment resistant psychoses and medical complexity among patients in secure forensic hospitals (Basrak et al., BJPsych Open (2021) 7, e31,1-7). Patients with schizophrenia in secure settings have a lower life expectancy compared to community peers of approximately 16 years. Evidence suggests patients in secure settings often gain significant amounts of body weight during their in-patient stays, many of whom develop complex obesity presentations.

Objectives: To ascertain changes in Body Mass Index (BMI) among patients in a secure forensic hospital setting over a 3.5 year period.

Methods: A prospective longitudinal study of repeated measures of BMI for all (n=91) patients in a National Forensic Mental Health Service (CMH Dundrum, Dublin, Ireland). BMI was measured six-monthly, giving up to seven time points for each patient. Generalized Estimating Equations (GEE) analysis was conducted to ascertain changes in BMI over time. This study formed part of the DUNDRUM Forensic Redevelopment Evaluation Study (D-FOREST) (Davoren et al., BMJ Open (2022) 12(7): e058581).

Results: A total of 91 patients were included in the study, mean age 33.46 years (SD 9.23). Mean length of stay was 8.09 years (SD 9.23). The most common diagnosis was schizophrenia (67%), followed by schizoaffective disorder (17.5%) and Autistic spectrum disorder (6.2%). Using GEE with BMI as the dependent variable, for the complete patient cohort, BMI changed significantly with diagnosis (Wald X^2=5817.58, df=7, p<0.001). Those with severe mental illnesses (psychoses) had the highest BMI of the group, and BMI tended to increase over time (p=0.109). Among patients who were in the secure hospital for four years or less, their weight gain was significant over time (Wald X^2=10.0, df=1, p=0.002).

Conclusions: We have shown high rates of obesity particularly in patients with psychoses and we have shown weight gain is significant during the first four years after admission to a national forensic service. This is a significant health concern and an area of unmet treatment need which is likely generalizable across secure hospitals in the EU.

Disclosure of Interest: None Declared

Epidemiology, Social and Cultural Psychiatry

O0011

A systematic review and meta-analysis on the main purpose of diagnostic classification systems and their utility for various purposes

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Introduction: The development of the 11th edition of the International Classification of Diseases has rekindled the research interest surrounding diagnostic classification systems (DCSs). According to expert consensus, the main purpose of DCSs is to provide guidance in clinical practice. There are no reviews in the international literature, however, assessing what mental health practitioners believe is the main purpose of DCSs.

Objectives: The aims of this systematic review were to assess what mental health professionals think is the single most important