

**Conclusions:** Ethical and legal complexities surround the topic of euthanasia. It is imperative to deepen our understanding of this practice within the context of the North Africa region, in order to formulate a comprehensive and well-informed policy.

**Disclosure of Interest:** None Declared

## Forensic Psychiatry

### EPV0519

#### Change in Quality of Life After the Relocation of a National Forensic Hospital: A Dundrum Forensic Redevelopment Evaluation Study (D-FOREST)

A. O'Reilly<sup>1</sup>, M. U. Waqar<sup>1,2\*</sup>, M. U. Iqbal<sup>1,2</sup>, H. Amin<sup>1,2</sup>, H. G. Kennedy<sup>2</sup> and M. Davoren<sup>1,2</sup>

<sup>1</sup>Central Mental Hospital, National Forensic Mental Health Service, Portrane and <sup>2</sup>Dundrum Centre for Forensic Excellence, Trinity College Dublin, Dublin, Ireland

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1202

**Introduction:** Forensic psychiatric services address the therapeutic needs of mentally disordered offenders in a secure setting. Clinical, ethical, and legal considerations underpinning treatment emphasize that the Quality of Life (QOL) of patients admitted to forensic hospitals should be optimised.

**Objectives:** This study aims to examine changes in the QOL in Ireland's National Forensic Mental Health Service following its relocation from the historic 1850 site in Dundrum to a new campus in Portrane, Dublin.

**Methods:** This multisite prospective longitudinal study is part of the Dundrum Forensic Redevelopment Evaluation Study (D-FOREST). Repeated measures were taken for all inpatients in the service at regular six-monthly intervals. The WHOQOL-BREF questionnaire was offered to all inpatients and an anonymised EssenCES questionnaire was simultaneously used to measure atmosphere in the wards. Data were obtained at five time points for each individual patient and ward. WHOQOL-BREF ratings were obtained across five time points with comparisons for four time intervals, including immediately before and after relocation. For 101 subjects across the four time intervals, 215 sets of data were obtained; 140 before and 65 after relocation with 10 community patients who did not move. Using Generalised Estimating Equations (GEE) to correct for multiple comparisons over time, the effect of relocation, with community patients as a control, was analysed by ward cluster and whether patients moved between wards. Observations were categorised according to security level — high dependency, medium secure, rehabilitation, or community — and trichotomised based on positive moves to less secure wards, more secure wards (negative moves), or no moves.

**Results:** The hospital's relocation was associated with a significant increase in environmental QOL (Wald  $X^2=15.9$ ,  $df=1$ ,  $p<0.001$ ), even when controlling for cluster location, positive and negative moves. When controlling for ward atmosphere, environmental QOL remained significantly increased after relocation (Wald

$X^2=10.0$ ,  $df=1$ ,  $p=0.002$ ). EssenCES scores were obtained within the hospital for three time points before relocation and two time points afterward. No significant differences were found in the three subscales before and after the relocation. All three EssenCES subscales progressively improved with decreasing security level (Patient's Cohesion: Wald  $X^2=958.3$ ,  $df=1$ ,  $p<0.001$ ; Experienced Safety: Wald  $X^2=152.9$ ,  $df=5$ ,  $p<0.001$ ; Therapeutic Hold: Wald  $X^2=33.6$ ,  $df=3$ ,  $p<0.001$ ).

**Conclusions:** The GEE model showed that the hospital's relocation improved self-reported environmental QOL. The cluster location made significant differences, as expected for a system of stratified therapeutic security, with a steady improvement in scores on all three atmosphere subscales.

**Disclosure of Interest:** None Declared

### EPV0520

#### The interplay of aggression and psychopathy in a correctional treatment setting

A. Voulgaris<sup>1\*</sup>, P. Briken<sup>1</sup> and E. Stück<sup>1</sup>

<sup>1</sup>Institute for Sex Research, Sexual Medicine and Forensic Psychiatry, Medical University Hamburg, Hamburg, Germany

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1203

**Introduction:** Aggression is a relevant risk factor for criminal behavior. Psychopathy is known to correlate with a higher risk for violent offenses and research suggests that successful therapy of psychopathy is complicated.

**Objectives:** Our goal was to explore the overlap between psychopathy and aggression and the specific influence of psychopathic traits on change in aggression during correctional therapy.

**Methods:** A pre-post-study rating psychopathy and aggression in men imprisoned for sexual and non-sexual violent offenses aged between 20 and 67 ( $M=37.6$ ,  $SD 11.6$ ) was conducted. The participants filled out standardized pre- and post-treatment ratings after admission and after an average of 16 months ( $n=144$  for pre-rating,  $n=89$  for post-rating). Psychopathy was measured via the PCL-R and aggression with the BDHI (Buss-Durkee Hostility Inventory).

We calculated two-tailed Pearson correlations for BDHI Pre-, Post-, and Change Scores and the PCL-R. Further, the BDHI pre-post-differences were compared using independent t-Tests, effect sizes were calculated using Cohen's  $d$  (small, medium, and large effect sizes are  $d = .20$ ,  $.50$ , and  $.80$ ). Also, unpaired t-tests were carried out to compare between participants with lower and higher PCL-R sum scores (median split,  $mdn= 16.8$ ,  $M=16.8$ ,  $SD=7.0$ ).

**Results:** Psychopathy facets 3 and 4 (lifestyle, antisocial) and the sum score correlate significantly with the pre-, and post-BDHI total score and the subscale direct hostility but not with indirect hostility. Regarding BDHI change scores, only the interpersonal facet of PCL-R correlated significantly with direct hostility and the total BDHI score. In the whole population, a significant reduction of the BDHI was only found in the subscale indirect hostility ( $p=.015$ ,  $cohens d=.26$ ). In the subgroup of individuals with lower PCL-R ( $<16.8$ ) showed a reduction of indirect hostility ( $p<.001$ ,  $cohens$