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Development of an EORTC Quality of Life Module for Renal Cell Cancer Patients: Phase I

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Introduction: In light of rising incidence rates and a mostly late diagnosis, renal cell cancer (RCC) patients are heavily burdened by both their disease and treatment. The structured assessment of their quality of life using patient-reported outcome (PRO) measures is important in order to provide them with appropriate interventions to maintain or improve their quality of life. Available questionnaires are predominantly symptom indices or were developed without conducting patient interviews.

Objectives: Hence, we report on the ongoing phase I development of an EORTC module for RCC patients, which will be used together with the EORTC QLQ-C30 core questionnaire.

Methods: Following the EORTC Quality of Life Group's Module Development Guidelines, a systematic literature review was conducted. Based on this review, issues were extracted and presented to healthcare professionals (HCPs) and patients for relevance assessment.

Results: 133 publications (14 on the development of RCC-specific PRO measures, 3 qualitative studies, 37 randomised controlled trials, 79 quantitative studies) were identified from which 150 unique issues were extracted. The issue list was reviewed by 14 HCPs (8 clinicians, 3 nurses, 2 psychooncologists, 1 physiotherapist) from 3 countries (Austria, Norway, United Kingdom) and rated regarding their relevance. An additional 13 issues were mentioned in the HCP interviews and included in the issue list.

Conclusions: The extended list of issues is currently used to interview patients. Data collection is expected to be completed by the conference, thus the poster will present the combined relevance scores (HCPs and patients) and the issues selected for the preliminary module to be tested in phase 3.

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Keywords: Quality of Life; renal cell cancer; questionnaire module development; patient-reported outcomes

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Making the most out of the EPA Research Summer School: from a group exercise to an international collaborative study protocol

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Introduction: The 2021 Research Summer School took place virtually, and 7 psychiatric trainees or early career psychiatrists (ECPs) from 7 different European countries participated in a working group on how to conduct a cross-sectional survey study.

Objectives: To provide an overview of the process of developing an internationally collaborative protocol during the EPA Virtual Research Summer School.

Methods: All participants were asked by the Faculty mentor chairing this working group to write a research question that could be investigated through a cross-sectional survey. After a brainstorming discussion, it was decided to investigate the experiences, knowledge, and attitudes of psychiatric trainees and ECPs about electroconvulsive therapy (ECT) in Europe, an effective yet controversial procedure.

Results: The process of developing a protocol entailed different phases. First, a literature search was conducted, which supported the need to explore more the attitudes towards ECT among ECPs. Through group discussion the study's objectives were decided, as well as the most appropriate methodology (including data collection and questionnaire use). At the end of the course, the core of the research plan was presented to all participants at the Research Summer School, preceding its implementation.

Conclusions: Participating in the EPA Research Summer School is a unique experience, a great learning opportunity, and can also lead to fruitful collaborations. It enabled the learning of the key aspects of designing and conducting a survey. In a short period of time, it was possible to design a study protocol for a future international cross-sectional survey on ECT.

Disclosure: No significant relationships.

Keywords: Psychiatric trainee; EPA Summer School; Early career psychiatrist; training

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Development of a web-based platform for the semi-structured record of the psychiatric interview during clinical practice: an opportunity to impact research and improve health care

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Introduction: Managing healthcare data is a major challenge for today's medicine. The use of artificial intelligence and big data tools

has allowed solving questions related to this topic. However, the wide heterogeneity in the psychiatric consultation record makes the retrospective analysis of these data limited due to a lack of information or differences between specialists.

Objectives: We aim to develop a platform that allows the structured record of medical care data (based on dementia) while maintaining flexibility and format for its usefulness during clinical practice in psychiatry.

Methods: We developed a web-based platform for the structured and semi-structured record of psychiatric evaluation. The instrument is diagnosed-oriented (for our version we used dementia). We used Core outcome sets and expert opinion to identify the relevant outcomes for the attention.

Results: A web-based platform is presented for the care of people with suspected dementia at different levels of care designed with the potential to record information of interest in research but also of clinical utility for closer follow-up.

Conclusions: This strategy allows developing the proposal towards other pathologies of interest. Also, with the integration of recommendation algorithms, a monitoring and recommendation system could be achieved to promote knowledge of psychiatric illness from routine practice. This proposal intends to have an impact by increasing the quality of care, reducing care times, and providing better approaches from primary care systems.

Disclosure: No significant relationships.

Keywords: Medical Record; Big Data; Web-based platform; Clinical research

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Measuring Restrictiveness in Forensic Mental Health in Germany - Translation and Adaptation of a Questionnaire

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Introduction: A feeling of restrictiveness is often associated with coercive practices, such as seclusion or restraint. In addition to these obvious procedures more subtle practices can also feel restrictive. Its registration and monitoring is of special importance in forensic mental health care since feelings of restrictiveness can lead to adverse events like increased aggression and suicidal intentions.

Objectives: To enable the registration of the experience of restrictiveness in forensic mental health settings in Germany, the Forensic Restrictiveness Questionnaire was translated from English into German.

Methods: Method: We used the TRAPD approach presented by Harkness (2003). This approach combined the expertise of professional translators and clinical experts and enabled adaptation at an early stage. The developed version underwent a cognitive pretest with a small patient sample to check for comprehensibility and interpretation of the questions in line with the original authors intention.

Results: A preliminary translation of the FRQ was developed. Translators combined their expertise from linguistic and clinical practice as well as their knowledge about English and German culture to produce a translation as close as possible to the original questionnaire with necessary adaptations. Remaining uncertainties, e.g., regarding comprehensibility of long phrases or uniform interpretation of certain wordings or questions, were addressed in the cognitive pretest with patients. The version produced can be used for validation.

Conclusions: Conclusion: The TRAPD approach produced a comprehensible and well adapted German translation of the FRQ. This version underwent a cognitive pretest by a small patient sample and is now ready for validation.

Disclosure: No significant relationships.

Keywords: Restrictiveness; Psychological Restraint; Questionnaire; Forensic Mental Health

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Italian validation of the Guilt And Shame Proneness Scale: preliminary results

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Introduction: Background: Recently, a new instrument, the Guilt And Shame Proneness Scale has been developed and showed promising psychometric properties. However, the Italian version of the Instrument has not still been validated. In addition, despite the growing number of studies on the topic, the knowledge regarding the role played by guilt, shame and rivalry in the relationship between pathological narcissism facets and suicidal ideation.

Objectives: To validate the Italian version of the Guilt And Shame Proneness Scale and to extend the knowledge regarding the relationships between guilt, shame, pathological narcissism and suicidality.

Methods: We administrated, to a sample of Italian adults, the Italian versions of the GASP, the Pathological Narcissism Inventory, the Beck Suicide Inventory and the Narcissism Admiration and Rivalry Questionnaire.

Results: The structural equation model testing the factorial structure of the Italian version of the GASP obtained a good fit. In addition, invariance among gender as well as other invariance tests were tested successfully. Finally, regression and mediation analyses showed that the subscale Shame Social withdraw mediate the relationship between Narcissism grandiosity and suicidal ideation. In contrast, rivalry and social withdraw in response to shame were no more predictive of suicidal ideation controlling for pathological narcissism levels.

Conclusions: The Italian version of the GASP appears promising to deepen the investigation of the pathological personality topic.

Disclosure: No significant relationships.

Keywords: shame; guilt; Suicide; validation