

Conclusions: The development of virtual reality systems for social skills training in individuals with autism spectrum disorders represents an innovative and promising approach to assisting in the development of these skills in both children and adults with autism. Virtual reality offers a more engaging and effective training experience, allowing users to practice social skills in a controlled environment tailored to their individual needs. Despite the promising results, there are still challenges to be faced, such as methodological issues and the need for awareness and training of health and education professionals.

Disclosure of Interest: None Declared

EPV0754

Nomophobia and mental health: are cell phones taking our sleep away?

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Introduction: The widespread use of mobile devices, particularly among young people, extends beyond entertainment to education and professional purposes. However, excessive smartphone use has led to health issues such as headaches, poor concentration, sleep problems, and anxiety. A condition called nomophobia, or the fear of being without a mobile phone, has emerged, though it's not officially recognized as a psychiatric disorder. In adults, 20% experience mild nomophobia, 50% moderate, and 20% severe symptoms, which can be measured using the Nomophobia Questionnaire (NMP-Q). Smartphone overuse is also linked to psychopathological issues like insomnia and anxiety.

Objectives: The aim of this study is to evaluate the impact of nomophobia in insomnia and anxiety.

Methods: Non-systematic review of the literature regarding nomophobia and anxiety and insomnia. The research was carried out through the PubMed® database, using the terms “nomophobia”, “nomophobia and anxiety” and “nomophobia and insomnia”.

Results: The included studies highlight that nomophobia is associated with higher anxiety levels in most individuals as well as a substantial correlation between nomophobia symptoms and insomnia.

Conclusions: Nomophobia is increasing due to technological advancements and widespread access. Overuse of mobile phones is linked to psychopathologic symptoms, like anxiety and insomnia. Raising awareness and helping young adults manage their phone use is essential for promoting health and well-being as digital technologies become an integral part of daily life.

Disclosure of Interest: None Declared

EPV0755

Contextual analysis for the implementation of a digital psychosocial intervention to enhance mental health outcomes in North Macedonia

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Introduction: This study represents the first effort in North Macedonia to examine the contextual attributes that may influence the effectiveness and acceptability of a novel digital intervention, DIALOG+, within the mental health care system. The intervention aims to enhance mental health outcomes through a structured approach, but its success depends on understanding the specific characteristics of the local health context.

Objectives: The primary objective of this research is to identify the key contextual attributes within the mental health care system of North Macedonia that are relevant to the successful implementation of DIALOG+. This includes examining factors that could impact both the effectiveness of the intervention and its acceptance by various stakeholders, including patients, clinicians, carers, and policymakers.

Methods: Data for this study were drawn from a variety of sources, including the National Mental Health Strategy 2018-2025, relevant documents from the World Health Organization, and other action plans. In addition, interviews were conducted with key stakeholders—patients, carers, clinicians, and policymakers—to gather perspectives on the anticipated introduction of DIALOG+ and assess the readiness of the mental health centers for its implementation. The data were subsequently mapped to a framework developed by the Ottawa Implementation Group, which outlines 14 key contextual attributes influencing health interventions.

Results: The findings were categorized into two subgroups, identifying both facilitators and barriers to the implementation of DIALOG+ in North Macedonia's mental health system. The intervention's characteristics as a broadly applicable psychosocial tool align well with modern approaches to psychosocial rehabilitation, particularly for individuals diagnosed with psychosis.

Conclusions: DIALOG+ presents a valuable tool for mental health professionals in North Macedonia, offering structured support for monitoring patient progress and achieving institutional objectives. The intervention has the potential to facilitate patients' reintegration into society, enhance their independence, and enable them to reach their full potential in the pursuit of a healthy and functional life.

Disclosure of Interest: None Declared

EPV0756

Evaluating the Clinical Reasoning Capabilities of AI Language Models in Diagnosing and Treating Depression

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Introduction: Artificial intelligence (AI) language models are increasingly accessible tools that offer potential support in mental health care. Despite their promise in revolutionizing mental health care through symptom assessment and treatment suggestions, concerns about their validity, accuracy, ethical considerations, and risk management persist. This study evaluates the clinical reasoning capabilities of two leading AI language models in assessing a clinical case vignette of Major Depressive Disorder (MDD).

Objectives: To evaluate the diagnostic accuracy, risk assessment proficiency, and quality of treatment recommendations provided by ChatGPT and Claude when applied to a standardised clinical vignette of a case of MDD.

Methods: A clinical vignette describing a 50-year-old male patient exhibiting symptoms consistent with MDD was presented to both ChatGPT 4o and Claude 3.5 Sonnet. The patient had significant cardiac disease, leading to unemployment, social withdrawal, and passive suicidal ideation. Both AI models were asked five identical questions regarding: (1) diagnosis, (2) severity assessment, (3) first-line treatment recommendations, (4) optimal antidepressant selection, and (5) suicide risk evaluation. Two psychiatrists independently reviewed the responses for accuracy, comprehensiveness, and alignment with established guidelines and evidence-based treatment for depression with comorbid cardiac disease.

Results: Both AI models correctly diagnosed MDD and accurately recognized the severity of the case due to the presence of suicidal ideation and significant functional impairment. Both offered comprehensive treatment recommendations, including pharmacotherapy and psychotherapy, and specifically suggested Sertraline as the antidepressant of choice due to its favourable cardiac safety profile. Both models assessed the patient as having a moderate to high suicide risk and provided a reasonably thorough analysis of risk and protective factors. However, limitations were noted in their ability to incorporate individualized patient nuances and psychosocial factors fully.

Conclusions: ChatGPT 4o and Claude 3.5 Sonnet demonstrated significant capabilities in clinical reasoning, providing diagnoses and treatment recommendations that align with best clinical practices. Their responses were largely accurate and comprehensive, indicating potential utility as supportive tools for healthcare professionals. AI models may assist non-specialists in preliminary assessment and management but are not substitutes for professional psychiatric evaluation. Caution is advised in relying on AI for clinical decision making, and further refinement is necessary to enhance their ability to integrate patients-centered care and adherence to ethical guidelines, to mitigate risks associated with self-diagnosis and inappropriate treatment.

Disclosure of Interest: None Declared

EPV0757

The wait time study: (Cost-) Effectiveness of a personalized e-health intervention for patients with psychiatric disorders on waiting lists for treatment– a randomized controlled trial

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Introduction: Access to timely mental health care in the Netherlands has become increasingly challenging, with waiting times steadily increasing in recent years. Extended waiting times for treatment in mental health care can be harmful due to increased severity of symptoms, poorer treatment outcomes and a reduced quality of life. There is growing interest in the potential of unguided e-health interventions to provide support during these waiting periods without overburdening healthcare professionals

Objectives: The main objective of this study is to test the clinical effectiveness and cost-effectiveness of a personalized unguided e-health intervention during the waiting list period.

Methods: A Randomized Controlled Trial (RCT) with two trial arms will be conducted: the intervention condition and the treatment as usual waiting list condition. Adult outpatients awaiting an intake at a several specialized mental health care institutions will be included in the study. Both trial arms will include repeated measures during the waiting period. The intervention arm will receive online access to a selection of existing e-health modules. Personalization will be achieved by employing both innovative and traditional methods to identify symptoms that are most influential for each individual participant. A Dynamic Time Warping analysis based on a three-week ecological momentary assessment (EMA) will be used to determine which specific symptoms are most responsible for maintaining the patient's overall complaints (4). This analysis will be used to provide tailored recommendations of e-health modules. The study's outcomes will focus on symptom severity, cost-effectiveness, quality of life, digital phenotyping and patient satisfaction during the waiting period.

Results: At this stage, no results are available yet as the study is still being conducted.

Conclusions: No conclusions can be drawn as the study is still being conducted.

Disclosure of Interest: None Declared

EPV0758

A Preliminary Exploratory Clinical Trial of the Efficacy of Digital Therapeutics for ADHD children in Korea

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Introduction: Recently, CBT-based digital therapy has been developed and used for the treatment of various psychiatric disorders, including insomnia, depression, anxiety and panic disorders, and alcohol/drug addiction. In the United States, the first game-based digital therapy for ADHD has also received FDA approval and is being used for the treatment of children and adolescents with ADHD.

Objectives: We conducted a randomized controlled study to examine the effectiveness of a digital therapeutic (model named 'ADAM-101') for children with ADHD in Korea, which was developed by Dragonfly GF Co., Ltd."

Methods: Participants are 18 children with ADHD, aged 7 to 13 years, who are visiting the Department of Child and Adolescent Psychiatry at Seoul National University Children's Hospital in Seoul, Korea. ADHD children with an IQ of 70 or above, who are currently taking stimulants and do not have other pediatric psychiatric disorders such as depression, anxiety disorders, tic disorders, ASD, were included in the study. They were randomly assigned to either the combined treatment group (medication + digital therapy, n = 9) or the medication-only group (n = 9). The digital therapy program was conducted using a tablet PC for 25 minutes a day, 5 days a week, for 4 weeks. Before starting the study, permission was obtained from the Institutional Review Board of Seoul National University Hospital. As