

Objectives: Five groups: individuals suffering from mental disorders – with or without a history of aggression; creative individuals; aggressive individuals; and a control group

Methods: Different personality questionnaires: anxiety, absorption, schizotypy and humor and the microgenetic method – a projection technique, using visual stimulation by means of a computerized experiment. The stimuli that were presented in this study were two artworks. They were presented in a blurry manner that became clearer and the exposure time became longer.

Results: An emotional process aroused, when exposed to the stimuli. The stimuli had an influence on the subject's internal world, which was reflected back in the verbal reports, especially the aspects of creativity and aggression. Secondly, the pathological groups were the lowest in the expression of creativity. However, they expressed more aggressive expression than expected while exposed to the stimuli. Moreover, these groups were ranked high, in traits related to creativity, such as schizotypy, absorption and the P dimension.

Conclusions: The Microgenetic-method gave a better perspective of the participant's personality and can be used as a diagnostic-tool. In addition, the research demonstrates that creativity and aggression are multi-dimensional traits and are noticeably present in the pathological groups. Therefore, a person coping with psychopathology should get assistance with controlling the expression of his urges. They should be directed towards a creative expression of their inner-world, allowing a full range of expression of his strengths and pains. This will sublimate the feelings of aggression.

Disclosure: No significant relationships.

Keywords: Creativity; Aggression; microgenetic method; sublimation - defense mechanism

EPV0558

Dynamics of clinical and psychological indicators of patients with anxiety neurotic disorders in the treatment of short-term individual analytic-cathartic therapy

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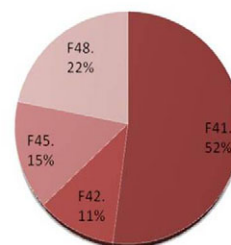
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Introduction: Analytical-cathartic therapy (ACTA), a modern model of psychotherapy, the theoretical basis of which is the psychology of relations of V.N. Myasishchev. ACTA is intended for the treatment of emotional disorders; the study of the dynamics of clinical and pathopsychological characteristics has not been previously conducted.

Objectives: To assess the dynamics of the clinical and pathological characteristics of patients with neurotic disorders, in whose clinical picture anxiety syndrome predominated, in the process of an individual ACTA.

Methods: A specially designed semi-structured interview, HARS, and the CGI (CGI-S - disease severity, CGI-I - improvement dynamics). The study group (N = 90) included patients with neurotic disorders, whose clinical picture was dominated by anxiety syndrome

Distribution of patients in the study group by diagnostic headings of ICD 10

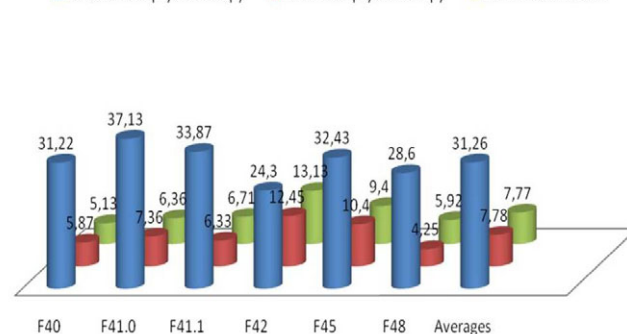


AKTA course 12 sessions 3 times a week for 60 minutes. Psychopharmacotherapy during the period of psychotherapeutic treatment in patients was not carried out.

Results: The study of ACTA was carried out before, after treatment and in the follow-up.

Patient indicators according to HARS

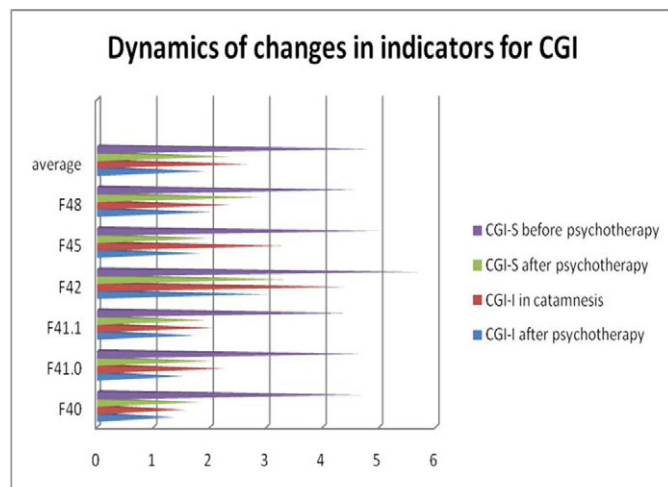
■ HARS before psychotherapy ■ HARS after psychotherapy ■ HARS in catamnesis



The overall decrease in the HARS score was 73.8% - the high success of the therapy in relation to the reduction of anxiety.

On the CGI-I scale - improvement from minimal to significant. On the CGI-S scale, no more than mild disease severity ($p < 0.01$). The change in the CGI scale also indicates the success of the therapy.

Conclusions: As a result of the study, clinical indicators were determined, on the basis of changes in which in dynamics the success of the treatment can be assessed. ACTA allows to clearly reduce anxiety and improve the general condition of patients with neurotic disorders.



Disclosure: No significant relationships.

Keywords: analytical-cathartic therapy; ACTA; psychotherapy; neurotic disorders

EPV0559

The relationship between mindfulness, depression, anxiety, and quality of life in individuals with schizophrenia spectrum disorders

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Introduction: Mindfulness-based interventions have received growing attention over the last years for the treatment of various mental disorders, including schizophrenia spectrum disorders (SSD), demonstrating their transdiagnostic validity. However, no study has examined the relationship of probable mechanisms underlying the therapeutic effects of mindfulness in SSD.

Objectives: The current study examines the relationship between mindfulness, depression, anxiety, and quality of life in individuals with SSD through quantitative measures.

Methods: A total of 83 participants with SSD were recruited at the in- and outpatient facility of the Charité – Universitätsmedizin Berlin in Germany. Participants completed the Southampton Mindfulness Questionnaire, Comprehensive Inventory for Mindful Experiences, and Freiburger Mindfulness Inventory, the Depression, Anxiety, Stress Scale, and the World Health Organization Quality of Life Questionnaire. PROCESS analysis examined the relationship between mindfulness and quality of life and the mediating role of depression and anxiety.

Results: Indicated a significant positive association between mindfulness and physical health, psychological and environmental quality of life. Depression and anxiety were found to mediate this relationship, with higher depression and anxiety

scores being related to lower mindfulness and quality of life. In this relationship, however, depression was found to be the stronger predictor.

Conclusions: The findings of this study provide insight into the mechanisms of mindfulness. Initial evidence for the transdiagnostic and process-based clinical relevance of MBIs for SSD has been found and future studies can further explore the role of mindfulness for central therapeutic processes of change by employing longitudinal designs.

Disclosure: No significant relationships.

Keywords: Depression; Anxiety; mindfulness; Schizophrenia spectrum disorders

EPV0560

On gender and cognitive flexibility. The REM-ACT study: Acceptance and commitment therapy versus a mindfulness-based emotional regulation intervention in anxiety disorders. A randomized controlled trial

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Introduction: Research is needed to explore whether cognitive flexibility may account for potential gender differences after mindfulness-based interventions.

Objectives: To compare the effectiveness of Acceptance and Commitment Therapy (ACT) versus a Mindfulness-based Emotional Regulation (MER) intervention on cognitive flexibility according to gender.

Methods: This study was carried out in a Mental Health Unit in Spain (Colmenar Viejo, Madrid). Firstly, 80 adult patients with anxiety disorders were randomized according to the score on the Acceptance and Action Questionnaire-II (blocking factor), of whom, 64 patients decided to participate (mean age = 40.66, S.D. = 11.43; 40 females). Each intervention was weekly, during 8 weeks, guided by two Clinical Psychology residents. A 2x2x2 mixed ANOVA (pre-post change x intervention type x gender) was conducted, with Sidak-correction post hoc tests. The dependent variable was the score on TMT-B.

Results: A natural logarithmic transformation was conducted to correct violation of normality and homoscedasticity assumptions. No statistically significant differences were observed on age or gender between interventions. No statistically significant interaction effect was observed between pre-post change x intervention x gender [$F_{(1, 52)} = .014, p = .907$]. An interaction effect was observed between pre-post change x intervention [$F_{(1, 52)} = 4.180, p = .046$; statistical power observed = 52%]: while TMT-B improved after ACT ($p = .001$; Cohen's $d = 0.607$), there were no changes after MER ($p = .367$; Cohen's $d = 0.097$).

Conclusions: These medium effect-size results confirm previous findings of our research team indicating cognitive flexibility improves after ACT but not after MER.