

Results: For L5, battery-derived and actigraphy-derived values had a bias of 0.46 [-0.10, 1.02], upper limit of agreement (LOA): 5.45 [4.49, 6.41], and lower LOA: -4.53 [-3.56, -5.49]. For M10, the bias was 0 [-0.92, 0.92], upper LOA: 8.19 [6.61, 9.76], and lower LOA: -8.19 [-6.61, -9.76]. Between diagnostic groups, there was no difference for battery-derived M10 ($p=0.652$), or L5 ($p=0.122$).

Conclusions: Our results suggest battery-derived and actigraphy-derived M10 and L5 show good overall equivalence. However, battery-derived methods exhibit large variability, which limits the clinical utility of smartphone battery data to infer sleep-wake metrics.

Disclosure: No significant relationships.

Keywords: digital phenotyping

EPP0516

Effect of medical education on European primary care physicians' knowledge in management of major depressive disorder and psychiatric emergencies

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doi: 10.1192/j.eurpsy.2022.747

Introduction: The challenge for primary care physicians (PCPs) is keeping up to date in managing major depressive disorder (MDD) and psychiatric emergencies.

Objectives: We evaluated whether an online educational video lecture directed at PCPs, could improve knowledge and confidence regarding management of psychiatric emergencies associated with MDD.

Methods: Educational effect was assessed using a 3-question repeated pairs, pre/post assessment survey. A paired-samples t-test was conducted to assess overall number correct and confidence change. A McNemar's test was conducted to assess question-level significance. P values < 0.05 are statistically significant. Cohen's d test was used to estimate the magnitude of effect of education. The activity launched on 8 April 2021, and preliminary data analysed as of 24 June 2021.

Results: 511 PCPs participated in the programme, of which 86 PCPs completed the pre- and post-assessment test. An average overall correct response rate of 28% pre- increased to 64% post- (129% relative increase, $P<0.001$; Cohen's $d = 1.13$). Knowledge on the burden of suicide and MDD improved from 23% pre- to 87% post- (278% relative increase, $P<0.001$). Knowledge regarding clinical data for novel therapies for use in psychiatric emergencies improved from 29% pre- to 50% post- (72% relative increase, $P<0.01$). Knowledge regarding signs of suicidal intent in patients with MDD improved from 31% pre- to 53% (71% relative increase, $P<0.001$) following education.

Conclusions: This study demonstrates the positive effect of online medical education on PCPs' knowledge and confidence in contemporary management of psychiatric emergencies associated with MDD in Europe.

Disclosure: The results of this study were derived from an educational programme which was developed through independent educational funding from Janssen Neuroscience

Keywords: Suicide; major depressive disorder; MDD; Psychiatric emergencies

EPP0517

Coproducing multilingual conversational scripts for a mental wellbeing chatbot - where healthcare domain experts become chatbot designers

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doi: 10.1192/j.eurpsy.2022.748

Introduction: Digital mental health interventions, such as chatbots that promote mental health and wellbeing are a promising way to deliver low-threshold support 24/7 for those in need. According to current knowledge about the topic, health care professionals should participate in the design and development processes for digital interventions.

Objectives: The aim of this presentation is to describe the interdisciplinary content development process of the ChatPal chatbot.

Methods: The content development process started in co-operation with mental health professionals and potential users to identify requirements. Content was created, evaluated and tested in international, multi-disciplinary group workshops, and online tools were used to allow the collaboration. Initial conversational scripts were drafted in English, and translated into Finnish, Swedish and Scottish Gaelic.

Results: A multilingual chatbot was developed and the conversation scripts were structured and stored using a spreadsheet. The conversation scripts will be made freely available online in due course using this structured approach to formatting chatbot dialogue content. It will allow repurposing the content as well as facilitating studies that wish to assess the design of conversation scripts for mental health chatbots. Conversation design process also highlighted some challenges in turning empathetic and supportive conversations to short utterances suitable for a chatbot.

Conclusions: The ChatPal chatbot is now available in four languages. As literature about the topic is still scarce, it is important to describe and document the content development processes of mental health chatbots. Future work will develop a conversational UX toolkit that would allow health professionals to design chatbot scripts using design guidelines.

Disclosure: No significant relationships.

Keywords: development process; chatbots; mental wellbeing; digital interventions

EPP0519

A collaborative, computer-assisted, psychoeducational intervention for depressed patients with chronic disease at primary care: protocol for a cluster-randomized controlled trial.

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