European Psychiatry S25

Conclusion: Psychiatrists need to be aware that a history of trauma may be an underlying factor in the presentation of people with ID to psychiatric services.

Reference: McCarthy J (2001). Post-traumatic Stress Disorder in People with Learning Disability. Advances in Psychiatric Treatment; 7, pp. 163-169.

Disclosure of Interest: None Declared

S0061

New research on media coverage of mental illness and suicide: implications for stigma, suicide mortality and social inclusion.

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Abstract: Introduction: The Werther effect is a phenomenon that has been demonstrated in the media. These media are being replaced by social media, the use of which has increased greatly over the decade especially among young people, allowing content to be streamed instantly and fostering connections around the world. At the same time, there is a deterioration in mental health among young people.

Objectives: To know if there is a Werther effect on social networks, as well as to understand the relationship between this effect and social media. It was also wanted to know if the posts follow the guidelines for dealing with suicide if there are differences between types of social media and if this effect is observed after the death of celebrities.

Methods: A systematic review was performed with analysis, data extraction and synthesis of the structured results following the PRISMA criteria.

Results: 15 articles were included, 11 of which showed Werther effects on social media, while only 4 were unrelated. It was found that most publications did not follow the recommended guidelines. No differences were observed between social media, while a greater effect was observed when it was related to celebrity suicide.

Conclusions: Social media can act as a suicide support network, as it is a space where there is a risk of infection by normalizing suicide and treating it insecurely. However, it has also been shown that it can act as an agent of change and protection, as many public individuals on social media seek help and express their concerns. More studies are needed to know the magnitude of the Werther effect on social media and to know the potential benefits of talking about suicide if it is done safely.

Disclosure of Interest: None Declared

S0062

Cognitive effects after ECT: how to treat them?

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Cognitive effects of electroconvulsive therapy (ECT): where do we go from here?, Amsterdam, Netherlands doi: 10.1192/j.eurpsy.2023.99

Abstract: How far have we progressed in the field of treating cognitive side effects? Six months after the last ECT treatment, about 15% of patients still have such symptoms, limiting daily life. So far, studies in the field of cognitive training for ECT-related cognitive side effects show few positive effects. Nevertheless, these patients seem to help well. Because they have no structural damage to their brain, training with long-term effectiveness may be available for them. Amsterdam University Medical Centers started the CONNECT clinic (Cognitive and Neuropsychological Aftercare ECT) in early 2022 for diagnosis and treatment of patients with long-term cognitive complaints (longer than six months) that hamper their daily functioning. After the intake and neuropsychological diagnostics, treatment starts if there is an indication. Patients are then offered 'cognitive strategy training' in an individual course. Developed in the field of neuropsychological rehabilitation, these help to get a grip on cognitive complaints by improving memory or executive functioning with learning strategies. Our initial experiences with patients show that patients master these strategies very well and quickly. We present a pilot project from the Amsterdam UMC where an individualized treatment-programme for long-term cognitive complaints after ECT is being implemented and evaluated.

Disclosure of Interest: None Declared

S0063

Challenges in differential diagnosis between autism spectrum disorder and psychotic disorders

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Abstract: Data from literature show that people with Autism Spectrum Disorders (ASD) are more likely to develop a psychosis than the general population. They also have a higher chance of developing schizophrenia than neurotypical controls. In order to diagnose comorbid psychosis in ASD in an adult, first a full psychiatric examination is necessary to decide on the directions of possible further diagnostics and, if necessary, to recommend appropriate additional tests, e.g. psychological tests using professional scales and questionnaires for adults. In the case of diagnostic doubts, there are indications to refer the patient to more specialized centers. Although the two conditions are different, they share some common features, such as social withdrawal and communication disorders. This can lead to problems in the diagnosis of psychosis in people with autism. The basic symptoms of the mentioned diseases usually differ between the two disorders. For this reason, it's important to try to get regular screenings and get care from the right professionals. A case report is presented of a patient, who received a diagnosis of ASD in the childhood, and later as an adult developed psychotic symptoms, which led to a change of diagnosis to schizophrenia.

Disclosure of Interest: None Declared