

one new physical abnormality identified during the clinic. A statistically significant difference was found for the psychological domain of the WHOQOL-BREF and the HoNOS particularly at third assessment. ( $\beta=4.64$ , Wald  $\chi^2=7.38$ , df:1,  $p=0.007$ , CI:1.3-8.1,  $\beta=-.889$ , Wald  $\chi^2=4.08$ , df:1,  $p=0.043$ , CI: -1.752 to-.026) respectively.

**Conclusions:** The results show a high prevalence of physical health conditions in this cohort, some of which represent a new diagnosis. This implicates better allocation of existing resources for screening and early detection, and potential to run joint clinics with primary care.

**Disclosure:** No significant relationships.

**Keywords:** Metabolic; chronic mental illness; physical health

## EPP0217

### The investigation of implicit Theory of Mind in patients with schizophrenia – a whole brain fMRI study

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**Introduction:** Theory of Mind is the ability to attribute mental states to others. Investigations have distinguished implicit and explicit forms of ToM. It is known, that patients with schizophrenia have deficits in their explicit ToM, and they also show altered brain activations during examining explicit ToM.

**Objectives:** In this study our aim was to investigate the underlying neural substrates of implicit ToM in patients with schizophrenia with fMRI.

**Methods:** Seven healthy subjects and two patients with first episode schizophrenia were involved. We used: false belief condition and control condition. All movies consisted of a belief formation phase and an outcome phase. The belief formation phase started with an agent placing a ball on a table in front of an occluder. Then the ball rolled behind the occluder. The movies could continue in different ways leading to a true or false belief. At the end of each movie, the agent reentered the scene and the occluder was lowered. In the outcome phase the ball was either present or absent behind the occluder. The control conditions started with a ball rolled behind the occluder on a table ended up with two different ways as the ball was either present or absent behind the occluder. There was no agent in the control movies.

**Results:** We found that healthy subjects activated significantly stronger the left lingual gyrus as well as the right temporoparietal junction.

**Conclusions:** Our findings suggest deficits in implicit ToM in schizophrenia and our findings also might help to clarify the underlying neural substrates of implicit ToM.

**Disclosure:** This research project was supported by the KTIA-13-NAP-A-II/12 (2018–2022) and the Hungarian National Excellence Centrum Grant 2018–2019.

**Keywords:** schizophrenia; Neuroimaging; Theory of Mind; fMRI

## EPP0218

### Digitised remote delivery of simulation in psychiatry during the pandemic and for the future.

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**Introduction:** Surrey and Borders NHS Foundation Trust's AVATr (Augmented Virtual-reality Avatar in Training) is a unique ground-breaking Virtual Patient simulation system, which uses the Xenodu platform to train learners in essential clinical and complex communication skills. Over 30 patient scenarios have been developed after identifying learner-specific development needs, including exploration of overt psychosis, assessment of capacity, sharing bad news, and neglect in care home residents.

During the session, the trainee is projected on to a large screen, using a camera and video special effects, which results in a life-like interaction with the Virtual Patient. Trainees can view themselves interacting with the Virtual Patient in real-time, from a unique 'out-of-body' perspective, immersed in a customdesigned interactive virtual environment. This is different to a first-person perspective used in virtual or augmented-reality systems in several clinical specialties. During the COVID-19 pandemic, we evolved the AVATr model to remote or hybrid sessions, where simulations were digitally enhanced, and have been run through Microsoft Teams. The simulation facilitator is connected to a multi-user video call, enabling the Virtual Patient to be projected as an attendee using Microsoft Teams.

**Objectives:** To evaluate the feedback from Doctors in training taking part on the education sessions.

**Methods:** We collected qualitative and quantitative information from participants after the teaching session.

**Results:** We received strongly positive results in all parameters measured. The presenters will show a detailed breakdown in the session.

**Conclusions:** The digitalised delivery of the virtual patient simulation, has been pivotal in limiting interruptions to communication skills training in mental health.

**Disclosure:** The NHS trust has co produced the simulation platform with a private software firm Xenadu Virtual Environments

**Keywords:** virtual reality; pandemic; remote education; simulation

## EPP0220

### Perceived clinical challenges when treating patients from another culture: a study among doctors training in psychiatry in Norway

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