Standardisation of cannabis use has been proposed in the literature as an instrument to assessing the level of risk. In the Lisbon Addictions Conference (2019) a group of 32 professionals from 13 countries and 10 disciplines participated in a back-casting foresight exercise aiming to addresses challenges of implementation of SJU. They proposed three key steps in the implementation of SJU: 1) constitution of task-force for an evidence-based approach to SJU; 2) expanding the available data on cannabis-related risks; 3) examining the relationship between 'risky use' and SJU.

Disclosure: No significant relationships.

Clinical/Therapeutic

EPA-EAN Joint Symposium: Etiology and Treatment of the Long Covid-19 Syndrome

JS0003

Covid-19: Lessons for Mental and Brain Health

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Psychiatry is facing major challenges during times of a pandemic as illustrated by the current COVID-19 pandemic. The challenges involve its actual and perceived role within the medical system, in particular how psychiatric hospitals can maintain their core mission of attending to the mentally ill while at the same time providing relief to general medicine. Since psychiatric disorders are the top leading causes of global burden of disease, we need to strengthen mental health care in the wake of the massive onslaught of the pandemic. While nobody can deny the need to act decisively and swiftly and ramp up intensive care readiness, we believe that the immediate availability of psychiatric care is just as important. In order to provide the best possible treatment conditions for people suffering from mental illness but as well for those suffering from the immediate pandemic's consequences such as isolation, reduced social interaction etc. instant and comprehensive provision is inevitable.

Disclosure: No significant relationships.

European

EPA-EFPA Joint Symposium: Update on Resilience in Mental Health Diseases and Care Givers

JS0004

Resilience and Wellbeing in Mental Health Workforce: Why it Matters and How to Develop it

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Zurich University of Applied Sciences, School of Applied Psychology, Zürich, Switzerland doi: 10.1192/j.eurpsy.2022.48 Resilience, mental health, and well-being are currently being discussed in general and for healthcare workers. Employees in the mental health workforce are subject to a variety of stresses. There have been longstanding stresses due to structural and discipline-specific conditions. In addition, there are special challenges due to the pandemic.

The systemic perspective of the biopsychosocial model of human development focuses on biochemical, muscular-neuronal, emotional, cognitive, and environmental risk and protective factors. These systemic events are embedded in different environmental systems that represent micro- to macrosystemic conditions. All these factors need to be reflected, evaluated, and positively developed in a profession- and workplace-specific manner. In this sense, 'career resilience" can be promoted individually, at team level and organizationally. Corresponding evidence-based programs for prevention and intervention are presented. In the discussion, it becomes clear that expectations of societal requirements can also be derived under the concern of prevention and promotion. It is necessary to complement self-care with the "caring team community" to promote the development of a comprehensive "caring society". Thus, we contribute to an overarching conception in terms of transdisciplinary consilience of resilience and wellbeing in mental health workforce.

Disclosure: No significant relationships.

JS0005

Resilience Factors Preventing Schizophrenia in Ultra-high Risk Patients: Lessons from Genetics

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Over the past decades, researchers and psychiatrists in the field of psychosis have moved from a conception of a chronic presentation to a more dynamic paradigm. Accordingly, schizophrenia is now conceptualized as a progressive illness that typically emerges during late adolescence and follows different stages: early vulnerability, ultra-high risk state, first episode of psychosis, and chronic disease. Only one-quarter of the ultra-high risk patients will convert to a full-blown psychotic episode within 3 years while the others, called non-converters, will remain at-risk, develop other psychiatric disorders, or fully recover. The reasons for this differential outcome are not yet understood but this concept opens the way to scientific research to determine the protective factors involved in resilience for non-converters. Based on the Gene X Environment interaction model, schizophrenia results from genetic vulnerability and environmental aggressions which can have an impact on the epigenome and gene expression. Recent studies have shown that genetic variants play a role in the resilience of psychosis. Polygenic risk scores, computed as the addition of genetic polymorphisms, can modulate the effects of genetic at-risk deletions (i.e. del22q11) that predispose to psychosis and may also influence the cognitive symptoms of ultra-high risk patients. Resilience, defined as the ability to withstand adversity, is not only related to external skills or psychotherapeutic care but could also be explained by internal molecular

factors. Identifying the genetic factors of resilience might help to stratify the risk and to develop precision medicine in psychiatry.

Disclosure: No significant relationships.

Mental Health Policy

EPA NPAs Symposium: On the Transitional Period from Pandemic Times Towards 'New Normal': Experiences and Challenges in Different European Countries

JS0006

Practicing Psychiatry in the Transitional Period: Lessons Learnt and Issues of the Steps Towards the New Normal

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The arrival of Covid-19 had huge impact on all aspects of life and psychiatry was no exception. Significant changes to mental health services were introduced to reduce the risk of infection among the inpatient population, patients in the community and in outpatients consultations. Use of virtual consultations in the community and stringent infection control in inpatient setting are examples of many. Those changes were associated with significant differences in patients' presentation and access to services. Multiple studies reported increased proportion of psychotic patients being admitted to inpatient care. However, there were no reports on increased suicide contrary to the expectation. This is despite increased reports of mental distress, depression, and anxiety in the wider population. These reports are consistent with our knowledge of mental health problems reported in times of wars and disasters. Hence, some of the learning from experience proved relevant when facing this pandemic. Unfortunately, Covid-19 continues to represent a challenge and relaxing of the restrictions introduced were short-lived with every variant reported. In addition, some of the changes adopted by mental health services proved to be innovative and more efficient way of delivering care in psychiatry. Therefore, the early indications suggest that some of those changes would become the new normal.

Disclosure: No significant relationships.

JS0007

Education and Training in Psychiatry: Challenges and Consequences of the Last Two Years, Future Perspectives and Actions Needed

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Psychiatric Association of Turkey, Department Of Psychiatry, Hacettepe University, Ankara, Turkey doi: 10.1192/j.eurpsy.2022.51 Pandemic-related extraordinary work burden on all healthcare professionals had a greater toll on younger colleagues, especially residents in diverse medical fields. Although psychiatry residents' degree of engagement in COVID-19 related services depends on the state's and institution's management of the crisis, it has often led to a significant interruption in the schedule of the training requirements. This interruption also was a consequence of the change in provision of the psychiatric services during the pandemic, such as a decrease in the size of the inpatient clinics, lower number o patients in the outpatient services, fewer ECT. These changes made it more difficult to fulfill the training requirement, which was adopted in some countries. Even when the tasks related to the training were accomplished the quality was difficult to determine. Furthermore, most of the educational activities were switched to online format due to pandemic-related precautions, a change that persists in some activities. Psychiatry education and training, not only postgraduate but also during medical school, requires observation and direct engagement. The switch from face-to-face to online in psychiatry training, including supervision, and service provision constituted a major challenge in psychiatry education. This required further adaptations by the teaching staff as well as the trainees, in their methods of teaching, learning, and interaction. The assessments of competencies presented another challenge for the psychiatry training. Despite all, the introduction of online education provided increased diversity in resources and in some situations increased access. Some challenges required modifications, whereas some beneficial changes are there to maintain.

Disclosure: No significant relationships.

JS0008

Impact of the Pandemic on Psychiatric Research and Publications

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In addition to the global negative impact on mental health of general population, as well as psychiatric patients, Covid-19 pandemic affected significantly research. Initially, lockdowns and restrictions of human contacts temporarily disrupted clinical research activities, but the unprecedented health crisis also provided unique opportunity to study epidemiology of mental disorders, direct and indirect effects of the pandemic on psychiatric disorders, underlying pathophysiological mechanisms, or longterm neuropsychiatric consequences. Research has refocused now on better understanding of the causes, presentations, outcome trajectories, and therapy of mental illnesses. New research topics are followed by the surge in publications covering Covid-19 and mental health and/or psychiatric disorders and treatments. The impact of the pandemic on research and publications is also evidenced by the results of a survey among psychiatric researchers.

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