

Schizophrenia and other Psychotic Disorders 03

EPP0234

Working in the Woodlands: A mixed methods evaluation of Green Care in First Episode Psychosis

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Introduction: Recognition of the essential role of nature-based activities for general wellbeing is expanding. Currently, there is limited evidence of the benefits of green care for those with severe and enduring mental illness, including psychosis.

Objectives: We aim to establish benefits and difficulties encountered during a 10-session green care programme for 18-30 year olds who have experienced first episode of psychosis (FEP) using a mixed methods approach.

Methods: This was a service evaluation of a 'Woodland Group' of 10 half-day sessions for participants with FEP. Sessions consisted of a welcome and agenda setting, ice-breaking activity, core nature-based activity. Quantitative data for this evaluation was collected through the 15-item Questionnaire on the Process of Recovery (QPR), and a semi-structured intervention experience questionnaire. Qualitative data was collected via a focus group. Thematic analysis was performed by the three co-authors.

Results: 4/8 patients showed reliable improvement on QPR outcome measures, 1 showed deterioration and 3 showed no change. Mean QPR scores showed modest increase from average 3.4 (week 1) to 3.8 (week 10). 100% of respondents would recommend this group to others. Thematic analysis identified themes of connection with nature and others, development of a sense of wellbeing and 'peacefulness' and new perspectives on psychotic experience.

Conclusions: This small, retrospective evaluation is the first to investigate green care interventions for young people experiencing FEP. Our results reflect the positive informal feedback from participants and supporting staff. Limitations include small sample size, incomplete data, and reliance on patient-reported outcomes. These findings show promise for nature-based activities within EIS.

Disclosure: No significant relationships.

Keywords: Nature-based care; Green Care; New intervention; First Episode Psychosis

EPP0233

The Investigation of Cognitive Functions and Clinical High Risk Status for Psychosis in First-Degree Relatives of Patients with Substance Induced Psychotic Disorder

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Introduction: The etiology of substance-induced psychotic disorder (SIPD) is an important research area to study.

Objectives: It is aimed to investigate clinical risk status for psychosis, schizotypal features and neurocognitive functions in siblings of the patients who have been diagnosed as SIPD and who have no family history of psychotic spectrum disorder.

Methods: This study included 41 healthy siblings of patients who have been diagnosed as SIPD according to DSM-V and 41 healthy controls without family history of psychiatric disorders (matched on age, gender, and years of education). The data collected with sociodemographic and clinical data form, Digid Span Test, Trail Making Test A, Trail Making Test B, Verbal Fluency Test and Stroop Test, Comprehensive Assessment of At-Risk Mental States (CAARMS) and Structured Interview for Schizotypy-Revised.

Results: It is determined that %41.5 of siblings and %7.3 of healthy controls are in one of the clinical high risk groups for psychosis according to CAARMS. There is significant difference in Trail Making Test A error and Trail Making Test B error and correction, verbal fluency test- lexical fluency-perseveration mean scores between siblings of patients and healthy controls.

Table 1: Comparison of psychosis risk ratios according to CAARMS between siblings of patients with SIPD and healthy controls

		Siblings of patients with SIPD	Healthy controls	X2	p
		n (%)	n (%)		
CAARMS GROUP	No	24 (58,5)	38 (92,7)	12,94	0,002*
	Vulnerability Group	2 (4,9)	0 (0)		
	Attenuated Psychosis Group 2a	13 (31,7)	3 (7,3)		
	Attenuated Psychosis Group 2a	1 (2,4)	0 (0)		
	Psychosis threshold	1 (2,4)	0 (0)		

Conclusions: Siblings of patients with SIPD have more schizotypal features than healthy control group and they take part more frequent in one of high risk group for psychosis. Schizotypal features are known as trait factor and show genetic predisposition. Siblings who are in high risk groups have more schizotypal features and it may point that predisposition to psychosis is more related to underlying genetic predisposition than environmental factors and social stressors.

Disclosure: No significant relationships.

Keywords: Clinical high risk groups; Familial predisposition; Substance induced psychotic disorder; Neurocognitive function

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The effects of fetal or neonatal hypoxia and genetic variants on age at onset of schizophrenia

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