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Disclosure: No significant relationships.

Keywords: ethics; debate; multidisciplinary; ethical code

#### **EPV0764**

### Hospitalization in Psychiatry: Patients' experiences at Arrazi Psychiatric Hospital in Morocco

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**Introduction:** Hospitalization in psychiatry is marked by the use of care without consent.

We therefore proposed to study from this perspective the feelings and opinions of patients on such an experience.

**Objectives:** The objective of this work is to explore the experiences of patients and their perception of the effects of this hospitalization, through 3 fundamental ethical principles: Autonomy, beneficence and non-maleficence.

**Methods:** This study will be conducted at Arrazi Psychitaric Hospital, in patients at the end of their stay, via a questionnaire.

**Results:** A total of 122 patients attended the study. A very large proportion of patients were satisfied with the premises, space planning, and had knowledge of a structured planning of the organization of care. A senior doctor was identified by 95% of them. Eighty five per cent were free to move around in the hospital. The information on the care offered was perceived by 83.7%. The rates are lower with respect to clear explanations received on the disease, the effects of drugs and the type of hospitalization.

Regarding the feelings experienced during the stay, 83% of people who spoke mentioned a painful experience. The feelings that prevailed were a feeling of helplessness, fear, worthlessness. On the other hand, a majority of patients expressed that the hospitalization had protective effects towards themselves and towards others, but that it wasn't justified.

**Conclusions:** These results suggest that autonomy and beneficence are respected. Therefore, an attention should be paid to various information given during the stay.

**Disclosure:** No significant relationships. **Keywords:** psychiatry; Ethical perspectives

#### **EPV0765**

# the impact of shared medical decision making on patient satisfaction in psychiatry

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**Introduction:** The era of the paternalisation of the patient is over, gradually giving way to new models, in particular that of "shared

medical decision making", with the aim of responding to the growing desires of the patient and giving priority to his autonomy. **Objectives:** to establish the influence of the new active position of the patient in the therapeutic process on the satisfaction of the psychiatric patient.

**Methods:** This is a descriptive cross-sectional study that took place over a period of 5 months from April 2019 to August 2019 in two university hospital psychiatry departments of Razi Hospital in Tunisia . The questionnaire was administered outside any period of hospitalisation, in order to increase the reliability of responses. We used a pre-established form including socio-demographic data, clinical data concerning the patient's mental disorder followed by a patient satisfaction questionnaire regarding the quality of care received in a psychiatric setting.

**Results:** The patients interviewed in our study reported a good level of satisfaction (67.5%) with their involvement in the therapeutic process. However, 45.5% of the patients expressed dissatisfaction with the information provided to them by their doctor about their mental health status. The majority of the subjects surveyed expressed satisfaction with the quality of the interviews conducted during hospitalisation (71%) and with the time spent with the doctor (67%).

**Conclusions:** Despite the fact that providing information to patients with mental health problems is a key element of patient satisfaction, not enough doctors actually include it in their daily practice.

Disclosure: No significant relationships.

**Keywords:** psychiatric care; shared medical decision making; the therapeutic process; the satisfaction

### **Forensic Psychiatry**

### **EPV0766**

# Hospitalization time is associated with weight gain in forensic mental health patients

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**Introduction:** Previous studies have found substantial weight gains in forensic mental health patients (FMHP) during hospitalisation. However, previous studies have not compared in- and outpatients, thus the weight change could be a general change over time. Research on the association between proportional hospitalization time (PHT) and weight change is lacking.

**Objectives:** To investigate the association between time hospitalized and weight change among FMHP.

**Methods:** Retrospective cohort study including FMHP with schizophrenia or bipolar disorder treated in the Region of Southern

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Denmark between 01jan2016 and 06apr2020. Patient characteristics and data on body weight was extracted from electronic medical records. The association between PHT and weight change per year was analyzed using linear regression. PHT was determined between each measurement as the total number of days hospitalized divided by the total number of days. Analyses were adjusted for gender, age, smoking, and antipsychotic medication.

**Results:** The cohort included 328 FMHP, of which 91% were diagnosed with schizophrenia. PHT had a significant positive dose-response association with weight change, with an estimated difference of +4.0 kg/year for FMHP who were hospitalized 100% of the time, compared to FMHP who were exclusively treated as outpatients. The associations were different for FMHP belonging to different categories of BMI at baseline (test for interaction; p=0.006). Underweight hospitalized FMHP had the largest difference in weight gain compared to FMHP treated outside hospitals (+18.0 kg/year, p=0.006), and the difference was smallest in obese FMHP (+2.3 kg/year, p=0.21).

**Conclusions:** PHT was positively associated with weight change among FMHP.

Disclosure: No significant relationships.

Keywords: Forensic mental health patients; Body weight;

Outpatients; Inpatients

#### **EPV0767**

### Forensic psychiatry in Pakistan: Where next following the Supreme Court judgement

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Introduction: No statutory mental health services exist for justice-involved individuals in Pakistan. The lack of expertise in forensic psychiatry serves to deny individuals with mental illness the critical support needed for mental healthcare and adequate court dispositions with serious unintended consequences including capital punishment for those who could otherwise be deemed treatment and not punishment worthy. A landmark judgement by the Supreme Court of Pakistan in February 2021 criticized the lack of forensic psychiatry expertise in Pakistan and directing the development of forensic mental health services and forensic psychiatry training in Pakistan.

**Objectives:** The key objectives are: 1. Understanding the timeline of how justice invloved individuals are manged by psychiatric services 2. The importance of the Supreme Court of Pakistan Judgement in affecting change 3. Highlights on how Queen's University will enhance forensic psychiatry in Pakistan

Methods: A literature review and personal networking facilitated the collection of important data in how justice invloved individuals are supported in Pakistan. The author has published and presented to Pakistani psychiatrists and the Pakistani judiciary on this topic. Queen's University is aiming to implement a 3-year plan to develop an online curriculum and certificate course to help train the trainers. Results: In the Pakistan's most populous province, Punjab, prevalence rates for psychotic illnesses (3.7%), major depression (10%), and personality disorders (65%) among men with higher rates for psychotic disorders (4.0%) and major depression (12%) among women.

**Conclusions:** In conclusion there is a dire need to develop forensic psychiatry in Pakistan and other low/middle income countries.

**Disclosure:** No significant relationships. **Keywords:** forensic; pakistan; psychiatry; justice

### **EPV0768**

### Association of early maladaptive schemas and psychiatric disorders between sex offenders

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**Introduction:** Schema-therapy (ST) - one of the promising integrative models of psychotherapy, which shows its efficacy in many mental disorders. ST has main theoretical concepts: early maladaptive schemas (EMS), coping styles, modes and basic needs. EMS are self-defeating emotional and cognitive patterns established from childhood and repeated throughout life. Existing literature shows the connection between EMS and behavioral problems, which could be more significant for patients with personality disorders. The prevalence of personality disorders is relatively low in the general population, but it's highly overrepresented in the forensic population, especially in groups of sex offenders.

**Objectives:** The aim of this study is to examine if there is a prevalence of some EMS between sex offenders and their association with a diagnosed psychiatric disorder.

**Methods:** Medical records and criminal case materials of 27 patients were reviewed, all of them were blamed for committing sex crimes and had to stay at the department for one month for forensic psychiatry examination. During their stay patients were examined several times and questioned with YSQ S3R.

**Results:** Most of the patients had psychiatric disorder: specific personality disorders (14), pedophilia (3), dependence syndrome (4), organic personality disorder (3). Some of them had several psychiatric diagnoses. The most prevalent EMS were abandonment, emotional deprivation, insufficient self-control and defectiveness.

**Conclusions:** These findings show the prevalence of personality disorder and several EMS in sex offenders, which could be useful for the full understanding of the concept of PD and improve the organization of medical care for these individuals.

Disclosure: No significant relationships.

**Keywords:** forensic psychiatry; schema-therapy; personality

disorder; sex offender

### **EPV0769**

Safer communities; how the first forensic community mental health team helped improve mental health, battle stigma, and reduce offending

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