

majority having a single marital status (62.5%), the professional activity before imprisonment were workers in 61.6%, a history of imprisonment more than twice in 62.5% of cases and 50.89% declared having been victims of physical acts, psychological or sexual abuse during their childhood. Murder, armed robbery, drug trafficking and rape were the most frequent offenses with respective rates of 25.2; 17.07; 13.82 and 9.75%. Anxiety was noted in 53.57% of cases, of the respondents, depressive syndrome was in 28.57% of cases, schizophrenia was reported in 18, 75% of cases and substance-related disorders were noted in 21.42% of cases.

Conclusions: Longitudinal studies should, in the coming years, try to understand the impact of imprisonment on the onset and evolution of psychiatric disorders.

Disclosure: No significant relationships.

Keywords: Prevalence; Psychiatric Disorder; Prison; penitentiary psychiatry

EPV0786

Psychiatric autopsy in two cases of assessment testamentary capacity

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Introduction: In Romania, in accordance with current law, “the will is the unilateral, personal and revocable act by which a person named testator disposes, in one of the forms required by law, for the time when he will no longer be alive”. The increasing complexity of modern financial and family structures has led to an increase in testamentary disputes, a fact reflected by the large number of forensic examinations in civil cases.

Objectives: Mental capacity are the majore concerns in the many of issues in elders but the great challenge is its retrospective evaluation, when the patient no longer exists. We focus on the testator’s mental capacity at the time the will was written.

Methods: We present two cases of will contestation in post mortem, in which the testator’s age was 65, respectively 70 years at the time of executing the will.

Results: In the first case the testator dies one month after he signed the will, the cause of death was cardiorespiratory arrest; cervical neoplasm; In the second case the testator dies two years after he signed the will. In both cases the patients did not have a history of neuropsychiatric disorders in the family doctor’s records. The circumstances of the production of a will, including the mental state of the testators and the true wishes of the testators were reconstructed using a psychiatric autopsy, based on the documents provided.

Conclusions: The complexity and subtlety of the problems reflected in these cases highlights the need to go beyond traditional criteria and assess situation-specific factors.

Disclosure: No significant relationships.

Keywords: Testamentary capacity; Mental Capacity; Will contestation; Psychiatric autopsy

EPV0787

Socio-demographic and clinical characteristics of the perpetrators of sexual assaults assessed at the psychiatric department of Mahdia

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Introduction: Sexual assault constitutes a major problem in Tunisian society. There is no definitive typology of the characteristics of those who sexually assault. The great diversity of sexual assault behaviors and the different underlying motivations do not allow us to describe a typical profile of the sexual assailant. There may be cognitive, personality trait, lifestyle, and pathway distortions involved in the etiology and maintenance of deviant sexual behaviors.

Objectives: To establish the socio-demographic and clinical profile of the perpetrators of sexual assault appraised in the psychiatric service of Mahdia.

Methods: This is a descriptive retrospective file-based study on all subjects assessed at the Taher Sfar Mahdia psychiatric department for sexual assault during the period from January 01, 2010 to December 31, 2020.

Results: Our sample consisted of 18 interviewed subjects. The median age was 40 years with extremes of age of the accused ranging from 30 to 61 years. The entire population is male. He was essentially of average socio-economic level. A psychiatric diagnosis was retained in 50% of the perpetrators of sexual assault: bipolar disorder (27.7%), schizophrenia (11.1%), antisocial type personality disorders (5.5%) and mental retardation (5.5%). Indecent assault was the most common assault followed by rape. The minors were victims in 33.3% of the cases Among those arrested, 72% were considered responsible for their acts and only one is considered irresponsible.

Conclusions: The studies having focused on the characteristics of the sexual aggressors concluded with a profile of the young man, single and badly inserted which does not constitute in any case a typical profile.

Disclosure: No significant relationships.

Keywords: expertise; forensic psychiatry; SEXUAL ASSAULT; Indecent assault

EPV0789

Challenges of ageing in prisons and forensic psychiatric settings

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Introduction: There is a current trend towards an increase in the number of elderly prisoners due to the increase in life expectancy and the change in the attitude of society and the judicial system. The

cut-off for “older offender” is defined from the age of 50, due to the lifestyle previous to prison and premature ageing.

Objectives: The authors intend to understand the challenges of aging in prison and forensic services, highlighting the psychiatric comorbidities of inmates and how these services can adapt to the needs of this population.

Methods: Non-systematic review of the literature.

Results: Studies of elderly in prisons and elderly forensic psychiatric patients are limited. Prisoners have increased physical and psychiatric morbidity and early mortality as they are more exposed to risk factors and more likely to have at least one health problem compared to older adults in the community. Compared to older people in the community, older prisoners are at higher risk for most psychiatric disorders including depression, psychosis, bipolar disorder, cognitive impairment, personality disorder and anxiety. Suicide rates are also higher among elderly prisoners. The inadequacy of the prison system to respond to the unique needs of elderly prisoners has a detrimental impact on their overall experience of incarceration. The development of specific services for elderly prisoners or the adaptation of mixed units for the elderly population is proposed.

Conclusions: The elderly population in prisons is growing and has higher risk of psychiatric pathology compared to community elders. Prison services with difficulties in identifying and meeting these needs.

Disclosure: No significant relationships.

Keywords: Secure Services; forensic psychiatry; older offender; Ageing

Model Systems

EPV0792

Crisis Intervention Team of Avilés. Results after three years

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Introduction: This Crisis Intervention Team was born in October 2018 with the aim of intensifying the treatment of people in psychiatric crisis situation.

Objectives: Provide an intensive and early assessment and approach in a timely manner. It also provides home care if necessary.

Methods: The team intensively performs scheduled visits, emergencies, telephone interventions and home care. It is in constant coordination with other structures of the mental health and socio-health network.

Results: A total of 83 patients have been included in our team since its inception. The youngest was 17 years old and the oldest 83 years old (exceptional case in evaluation). The mean age was 45.6 years. 67.4% were female (56 women) and 32.5% male (27 men). The delay in care did not exceed 48 hours.

200 patients were evaluated into suicide protocol, with ages ranging from 15 to 85 years, with a mean age of 45.4 years. The delay in care does not exceed 10 days.

Conclusions: This is a team that offers a rapid response, dedicates the necessary time for a correct evaluation of the risk, of the evolution and tries to establish a therapeutic alliance in record time. It is able to tolerate a certain degree of uncertainty, manage and tolerate the level of risk. He stands out for being flexible and dynamic in order to be able to adapt to the patients and their circumstances. This requires empathy, closeness and commitment.

Disclosure: No significant relationships.

Keywords: crisis intervention team Aviles

Intellectual Disability

EPV0793

Use of the results of the study of oral fluid and buccal epithelium in the diagnosis of Alzheimer's disease

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Introduction: The aim of the study was a comparative analysis of the results of neuropsychological tests with the indicators of the study of oral fluid and buccal epithelium cytograms in patients with Alzheimer's disease.

Objectives: In the main group of 12 patients with Alzheimer's disease, $m=76.25\pm 4.89$. There were 12 cognitively healthy people in the control group. The average MMSE score among the observations of the main group was 13.42 ± 3.63 .

Methods: The ADAS-COG scale was used to detail the impaired cognitive functions. The concomitant pathology is compensated. The content of BDNF, TNF- α , IL1RA, IL-6, and IL-8 was determined in the oral fluid and in the blood serum.

Results: When analyzing buccal cytograms, attention was drawn to a pronounced increase in the number of cells with micronuclei in patients with AD to 1.8%; in the control group, the median was 0.1% ($p<0.05$). A direct correlation was established between the number of binuclear cells and the level of BDNF in the blood serum ($r=0.646$; $p=0.03$) in patients with AD. It is also important to note that the level of serum BDNF had a significant direct correlation with immediate memory, and the concentration of salivary BDNF correlates with the parameter of naming objects.

Conclusions: Correlations between amnesia, speech disorders, praxis, gnosis and pathology of the oral fluid and buccal epithelium, especially with the severity of karyopycnosis and karyorexis, have been established, indicating a direct correlation between the neurodegenerative process pathogenetically associated with Alzheimer's disease and the processes of systemic inflammation and degeneration of the buccal epithelium.

Disclosure: No significant relationships.

Keywords: ORAL FLUID; BUCCAL EPITHELIUM; Alzheimer's disease