

ments in schizophrenia, aerobic exercise has a profound impact on the plasticity of the brain of both rodents and humans such as inducing the proliferation and differentiation of neural progenitor cells of the hippocampus in mice and rats. Aerobic exercise enhances LTP and leads to a better performance in hippocampus related memory tasks, eventually by increasing metabolic and synaptic plasticity related proteins in the hippocampus. In healthy humans, regular aerobic exercise increases hippocampal volume and seems to diminish processes of ageing like brain atrophy and cognitive decline. Several meta-analyses demonstrate the beneficial effect of exercise on function, positive as well as negative symptoms and brain structure in multi-episode schizophrenia.

Disclosure: No significant relationships.

Keywords: Mental Disorders; Treatment; exercise; physical health

Building Optimal Treatment Outcome through Enhanced Collaboration between Patients and Clinicians: Unlocking the Potential of Patient-Reported Measures

S0015

How to Integrate Patient-Centered Measures in Routine Care: Lessons from Belgian Experiences

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BACKGROUND Against the treatment gap and the long delays in seeking treatment for mental health problems, primary care psychology (PCP) was added to reimbursed outpatient mental health services in the Belgian healthcare system. **PURPOSE** Within the Evaluation of Primary Care Psychology study (EPCAP), which provides evaluation of the measure of reimbursement of PCP, the objectives were: (1) To describe the patient-reported outcome measures (PROMs) and patient-reported experience measures (PREMs) of patients treated with PCP and (2) formulate guidelines to integrate patient-related findings and experiences within community mental health services. **METHOD** 428 patients participated in an online survey at the start of their PCP treatment in Belgium and after 3 and 6 months. Besides sociodemographic characteristics, DSM-5 mental disorders, suicidality, and service use, they were questioned about their findings (PROMs) and experiences (PREMs). **RESULTS** Almost 90% met the criteria of a lifetime as a 12-month DSM-5 mental disorder or STB at the start of PCP treatment. Both subjective well-being and the proportion of patients who had positive experiences regarding their PCP treatment increased with 46% resp. 23.2% after 3 months and remained stable after 6 months. **CONCLUSION** Although PCP in Belgium serves a clinical patient population with high proportions of lifetime and 12-month mental disorders and suicidality, their subjective well-being increased after 3 months and remained stable after 6 months. Despite differences between groups of patients, PCP seems to have a positive effect on subjective well-being of these patient in short term. Integration of PROMs and PREMs into PCP were recommended.

Disclosure: No significant relationships.

Keywords: Mental Disorders; Primary care psychology; Patient-reported outcome measures; Patient-reported experience measures

S0016

The Value and Challenges of Implementing Patient Centered Measures in a Psychiatric Hospital Setting.

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Background: Measuring and interpreting outcome is challenging in mental health services than in some other areas of health care. **Objectives:** The aims of this study were to (1) explore results of Patient-Reported Outcome Measures (PROMs) and Patient-Reported Experience Measures (PREMs) in psychiatric hospital settings, (2) describe the relation between generic PROMs (measure of well-being) and specific PROMs (disorder-specific symptom assessments), (3) describe the congruence between patients and clinicians evaluation of the care experience (based on Patients reported experience measures and Clinician reported experience measures). **Methods:** A total of 269 consecutive patients participated in this study. **Results:** (1) Subjective experience of well-being (outcome) improved after hospitalisation (+15%, avg). High satisfaction with subjective experience of care (85%, avg). (2) Significant correlation between patients' assessment of subjective well-being (generic PROMs) and clinical improvement (specific PROMs) ($p < 0.007$). (3) Significant correlation between patient and clinician experience of care ($p = 0.002$). **Conclusions:** One of the first French studies on the use of standardised PROMs and PREMs in psychiatric hospital settings. Results suggest that subjective well-being measures complement the assessment of the patient's clinical symptoms and social functioning. The effectiveness of care depends on the consideration of these three dimensions. The use of core patient-reported measures, as part of systematic measurement and performance monitoring in mental health care, provides valuable input to the clinicians' practice.

Disclosure: No significant relationships.

Keywords: Patient-reported outcome measures (PROMs); Patient-reported experience measures (PREMs); Value-Based Healthcare; Quality of Hospital Care

S0017

How to Optimise the Collection of Patient-Reported Outcomes in the Context of a Specific Disease such as Eating Disorders.

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Background: Eating disorders (EDs) are severe psychiatric disorders which, when left untreated, can lead to psychosocial impairment, physical disability and death. In the United Kingdom, many