

$p < 0.001$ ) however the correlation with resilience was not significant ( $r = -0.06$ ,  $p = 0.76$ ).

**Conclusion.** Sexual harassment is a pervasive problem among adolescents that is associated with low well-being, low self-esteem, the presence of depressive and anxiety symptoms, and increased suicidality. It is therefore essential for relevant stakeholders to develop and implement appropriate policies that would assist in identifying and addressing this menace among school students. Adequate psychological intervention should also be provided for affected individuals.

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### Lifestyle Interventions in Preventing Excess Weight Gain in First Episode of Psychosis (FEP): A Systematic Review

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doi: 10.1192/bjo.2023.171

**Aims.** Weight gain, cardiometabolic complications and psychosis are implicated in significant reduction in life expectancy. While there is current research to uncover a shared aetiology for mental illness and metabolic diseases, people with FEP are especially vulnerable to rapid weight gain during the early stages of treatment due to the side effects profile of many antipsychotic medications. Physical exercise along with lifestyle and dietary modifications have proven efficacy in weight reduction, improving metabolic profile and mental well-being and may be valuable interventions during the early stages of a psychotic illness. Our aim was to find evidence to support the use of non-pharmacological interventions in managing weight gain in people with FEP.

**Methods.** We conducted a systematic review of electronic databases; MEDLINE, EMBASE and PsycINFO on 06/01/2023. We included all studies that looked at non-pharmacological interventions in the management of weight gain for people diagnosed with FEP. Findings are reported in line with Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA). Two authors independently assessed the included studies' methodological quality using The National Institute of Health (NIH) quality assessment tool for cohort and cross-sectional studies and all included studies were rated as good.

**Results.** Our search identified 221 studies and 5 met our inclusion criteria. All studies had a control group that received treatment as usual (TAU) and a test group with Interventions such as dietetic support and exercise programs. Four of the studies demonstrated reduced weight gain on follow up with lifestyle interventions that were statistically significant while the remaining one study did not show a significant difference between groups. One study showed sustained improvement in diet quality with no significant weight change at 2 year follow up. The essential lifestyle interventions that led to reduced weight gain included psychoeducation on healthy lifestyle, dietary modifications and exercise.

Three studies included cardiovascular risk factors such as lipid profile and blood glucose. One of them demonstrated increased cardiometabolic risk factors at baseline which worsened initially but improved after 1 to 2 years of intervention. Another study found increased cholesterol in the intervention group and

increased glucose levels in the TAU group and the third study did not find a significant difference between the groups.

**Conclusion.** Lifestyle weight-management interventions have the potential to reduce weight gain in patients with FEP receiving anti-psychotic treatment, but research evidence is very limited at present.

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### Study on Concordance of ICD-11, ICD-10, and DSM-5 Diagnostic Guidelines for Alcohol and Opioid Use Disorders

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doi: 10.1192/bjo.2023.172

**Aims.** To study the implications of proposed changes in guidelines in ICD-11 in Alcohol and Opioid Use Disorder patients. To evaluate the concordance of ICD-11 with ICD-10 and DSM-5. To compare endorsement of various criteria for dependence between ICD 11 and other systems. To examine the agreement between ICD-11 and other systems with regard to the severity of dependence. To compare the application of WHO ASSIST in screening across systems.

**Methods.** A cross-sectional study among newly registered, adult male patients attending NDDTC OPD, or community clinics and using the substance in the last week. N = 200 (100 each of Alcohol and opioids). Instruments: Semi-structured proforma, CIDI 3, ASI-lite, WHO-ASSIST, AUDIT. Items of CIDI were used to make the diagnosis according to various systems. The diagnostic agreement was assessed by Kappa. Endorsement frequencies of the criteria were compared across diagnostic systems. Scores of scales across systems were compared using Two Independent sample t-test.

**Results.** The highest prevalence of Dependence was found using ICD-11. Almost perfect agreement between ICD-11 and ICD-10 for both Use Disorder and Dependence for all substances (kappa >0.8) except Inhalants. Agreement for AUD, CUD, and IUD between ICD-11 and DSM-5 was substantial but less than almost perfect. Similar findings for ICD-11 Dependence and DSM-5 Moderate-Severe Use Disorder in Benzodiazepines and Inhalants (kappa ranging from 0.693–0.790). High endorsement frequencies of Salience for Alcohol and Opioids, and Craving and Tolerance for all substances (ICD Dependence); Inability to cut down or control, Craving, and Tolerance (DSM-5 UD). Mean scores of AUDIT and ASSIST were generally lower in participants who received the diagnosis according to ICD-11 (sig. difference for CUD and Cannabis Dependence).

**Conclusion.** There are significant implications of the changes in ICD-11, and further testing of the impact of these changes needs to be done.

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### Barriers to Choosing Psychiatry as a Career in Pakistani Medical Students and Junior Doctors – Survey Study

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doi: 10.1192/bjo.2023.173

**Aims.** In a majority of low and middle-income countries, the mental health system is weakened due to poor resources as well as poorer recruitment and retention rates in psychiatry among junior doctors. The present study utilizes a mixed-methods approach to explore the factors associated with low recruitment and retention of junior doctors in Psychiatry.

**Methods.** This study utilized an online survey administered among medical students and postgraduate trainees in psychiatry in Pakistan. The survey was open for 5 weeks for data collection from Nov 21st to Dec 31st, 2022. The survey was distributed conveniently using social media platforms and supplemented by snowball sampling procedures. This survey explored common myths about mental illness and psychiatrists using close-ended questions. Open-ended questions were asked to probe the participants on solutions to improve recruitment into psychiatry be improved.

**Results.** A total of 103 responses were received on the online survey, with the majority (83, 80%) of respondents being females. A majority (66, 64%) of respondents were medical students and 37 (36%) were junior doctors. Most responses were received from the two largest government sector medical universities in Karachi Pakistan, Jinnah Sindh Medical University (67%) & Dow University of Health Sciences (23%).

A total of 62 (60%) respondents reported a lack of exposure to Psychiatry in medical students, to make it a career choice. A larger proportion 57 (55%) felt working in Psychiatry can affect their own mental health. A total of 43 (40%) were not sure if Psychiatry is fulfilling enough as a career and 58 (56%) felt that job satisfaction in psychiatry is difficult to achieve. Around 60% were concerned that mental health conditions are chronic and enduring psychiatrists may not have many options for treatment. In open-ended responses, several common themes emerged. Most respondents commented about their lack of exposure to psychiatry as medical students, which accounts for their reluctance to choose Psychiatry.

**Conclusion.** Psychiatry forms a very limited part of the medical school curriculum and students' placements. Myths and stigma around mental illness can lead to low recruitment in Psychiatry and stigma can be challenged with more exposure to psychiatry during medical university years. Early medical study years have an influence on career choice and Psychiatry should be introduced relatively early as clinical placement. Psychiatry conferences, seminars and workshops on the local and national level can help in inspiring Medical students and junior doctors.

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## National Prescribing Patterns of Psychotropic Medications in Older Adults in Oman

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doi: 10.1192/bjo.2023.174

**Aims.** High rate of psychotropic medications use in elderly people has been reported in the literature. Potentiality inappropriate prescriptions (PIPs) is very common as well. This issue has not been investigated in Oman previously. The aim of our study was to assess the patterns of psychotropic medications prescribed for older adults in the psychiatry clinics in Oman, screen for PIPs and plan for future actions to minimize inappropriate prescriptions.

**Methods.** This is a cross sectional descriptive study using the information in patient's medical records. It was conducted in 12 health care institutions which equally represent all Governorates of Oman. All patients who aged  $\geq 60$  years old who attended psychiatry clinics from January 2019 to June 2021 and were prescribed psychotropic medications were included. All psychotropic drugs were evaluated including: antidepressants, antipsychotics, Mood stabilizers and hypnotics. STOPP criteria were applied to detect PIPs.

**Results.** 1409 patients (70%) out of 1995 elderly patients who attended the psychiatry clinics in the study period as a new case were prescribed psychotropic medications. Rate of polypharmacy in our study is 38.9%. The most common medications prescribed were risperidone (18.1%) from the antipsychotic category, citalopram (23%) from the antidepressant group and promethazine (30.1%) from the hypnotics group. Regarding the use of sedative medications, 18.5% of the patients were prescribed a benzodiazepine and 35.6% of them were prescribed an antihistamine. When assessed the pattern of medications prescribed in healthy people compared to people with different categories of major medical morbidities, no differences were observed. We found 130 (9.3%) potentially inappropriate prescriptions in our study based on STOPP criteria which included use of long-acting benzodiazepine (Diazepam), prescription of anticholinergic medication to treat extrapyramidal side effects (procyclidine) and use of tricyclic antidepressants in specific categories of medical diseases.

**Conclusion.** The patterns of psychotropic prescriptions for older adults in the outpatient setting in Oman raise concerns about 2 main issues: psychotropic polypharmacy and high rate of benzodiazepines and antihistamines use. This warrants further investigation of these issues in separate studies to identify risk factors. We also recommend implementing certain actions to minimize inappropriate prescriptions including reviewing the availability of appropriate psychotropic medications for this age group in Oman, creating a national guideline for prescribing and providing continuous medical education to the physicians in the primary and secondary health care institutions regarding this aspect.

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## Identifying the Knowledge and Attitudes Towards Suicidal Warning Signs Among University Students in the UAE

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