

## EW0100

### Supportive text messages for patients with depression – A randomized controlled trial

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**Background** Depression is projected to be the primary cause of disability worldwide by 2030. Our aim was to test the feasibility of a supportive text messaging mobile health intervention in improving treatment outcomes in depressed patients.

**Methods** We performed a single-rater-blinded randomised trial involving 73 patients with Major Depressive Disorder. Patients in the intervention group ( $n = 35$ ) received twice-daily supportive text messages for 3 months while those in the control group ( $n = 38$ ) received a single text message every fortnight thanking them for participating in the study.

**Results** After adjusting for baseline BDI scores, a significant difference remained in the three month mean BDI scores between the intervention and control groups: (20.8 (SD = 11.7) vs. 24.9 (SD = 11.5),  $F(1, 60) = 4.83$ ,  $P = 0.03$ ,  $\eta^2 = 0.07$ ). The mean difference in the BDI scores change was significant with an effect size (Cohen's  $d$ ) of 0.67. Furthermore, after adjusting for baseline scores, a significant difference remained in the three month mean self-rated VAS scores (EQ-5D-5L scale) between the intervention and control groups, 65.7 (SD = 15.3) vs. 57.4 (SD = 22.9),  $F(1, 60) = 4.16$ ,  $P = 0.05$ ,  $\eta^2 = 0.065$ . The mean difference in change mean self-rated VAS scores was also statistically significant with an effect size (Cohen's  $d$ ) of 0.51.

**Conclusions** Our findings suggest that supportive text messages are a potentially useful psychological intervention for depression, especially in underserved populations. Further studies are needed to explore the implications of our findings in larger clinical samples.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1969>

## EW0101

### Mobile health program to reduce psychological treatment gap in mental healthcare in Alberta through daily supportive text messages – Cross-sectional survey evaluating Text4Mood

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**Background** To complement the oversubscribed counselling services in Alberta, the Text4Mood program which delivers daily supportive text messages to subscribers was launched on the 18th of January, 2016. This report presents an evaluation of self-reports

of the impact of the program on the mental wellbeing of subscribers.

**Methods** An online link to a survey questionnaire was created by an expert group and delivered via text messages to mobile phones of all 4111 active subscribers of the Text4Mood program as of April 11, 2016.

**Results** Overall, 894 subscribers answered the survey (overall response rate 21.7%). The response rate for individual questions varied and is reported alongside the results. Most respondents were female (83%,  $n = 668$ ), Caucasian (83%,  $n = 679$ ), and diagnosed with a psychiatric disorder (38%,  $n = 307$ ), including Depression (25.4%,  $n = 227$ ) and Anxiety (20%,  $n = 177$ ). Overall, 52% ( $n = 461$ ) signed up for Text4Mood to help elevate their mood and 24.5% ( $n = 219$ ) signed up to help them worry less. Most respondents felt the text messages made them more hopeful about managing issues in their lives (81.7%,  $n = 588$ ), feel in charge of managing depression and anxiety (76.7%,  $n = 552$ ), and feel connected to a support system (75.2%,  $n = 542$ ). The majority of respondents felt Text4Mood improved their overall mental well-being (83.1%,  $n = 598$ ).

**Conclusion** Supportive text messages are a feasible and acceptable way of delivering adjunctive psychological interventions. Given that text messages are affordable, readily available, and can be delivered to thousands of people simultaneously, they present an opportunity to help close the psychological treatment gap for mental health patients.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1970>

## EW0102

### Explanatory and confirmatory factor structure of beck scale for suicide ideation in non-clinical sample

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**Introduction** The Beck Scale for Suicidal Ideation (BSS) is a self-report 19-item scale preceded by five screening items. The BSS and its screening items are intended to assess a patient's thoughts, plans and intent to commit suicide. All 24 items are rated on a three-point scale (0 to 2). In this study, scores from the five screening items were included in the overall score. Therefore, total scores could range from 0 to 48. There is no study until this date that examines the factor structure of BSS among Kuwaitis.

**Objectives** The current study investigated the original three-factor model of the (BSS) in non-clinical sample.

**Methods** Sample one consisted of 285 males and 300 female students from Kuwait University while sample two consisted of 201 males and 302 females from Kuwait University. The Arabic version of BSS was administered to participants. Explanatory factor based on sample 1 and conformity factor analysis based on sample 2 of BSS were used in this study.

**Results** The explanatory and confirmatory factor analysis of (BSS) extracts three factors and three structures of BSS. Factor I = active suicidal desire; Factor II = preparation; Factor III = passive suicidal desire. In addition, the results revealed no significant gender differences in the factor structure of BSS.

**Conclusions** The results of both confirmatory and exploratory factor analysis indicated that the original three-factor model provided the best fit for the two genders.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1971>