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Disclosure: No significant relationships.

Keywords: Paranoia; Reasoning biases; Blended digital therapeutic; fast and slow thinking

COVID-19 Pandemic: The Necessity of Family Mental Health Interventions During Pregnancy

S0023

The Importance of Cognitive Appraisal and Social Support in Pregnancy During COVID-19 from an Interdisciplinary View.

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Aim: To describe how a US-based psychiatric Mother-Baby Unit adopted a virtual platform during the pandemic. Objectives: When the Covid-19 pandemic descended, mental health clinicians worldwide were faced with maintaining access and care delivery. Pregnant and newly postpartum women experienced the pandemic and lockdown through the lens of impending parenthood and new parenthood--amplifying distress, isolation, and lack of social and family support. The lockdown prevented those with most acute illness from accessing daily treatment in our structured, supportive intensive treatment setting. We acknowledged the urgency of developing a method to continue to treat our patients in a group environment that offered psychotherapy, psychopharmacology, dyadic and family intervention, and social support. Methods: The hospital purchased "Zoom for Health" platform to ensure compliance with regulatory guidelines. Cameras for individual computers were purchased with philanthropy funds, obtaining them quickly, compared to waiting for hospital funding. The clinical team designed a schedule of groups and individual sessions, each with their own zoom link. Each morning, a team member, sent the daily schedule through the patient portal of the EMR. Conclusion: Before the pandemic, the census was 12 pts per day. The full-day program paused for 7-10 days although individual sessions and medication management were conducted by phone as the virtual platform was constructed. Once established, census resumed normal levels. Challenges to running the Day Hospital virtually included: technology glitches, family demands and distractions, and privacy concerns. Overall, the program was a success wherein women requiring intensive treatment were able to receive treatment and social support.

Disclosure: No significant relationships. **Keywords:** Partial Hospital; Virtual Treatment; Postnatal Depression; Mother-Baby Unit

S0024

Eating Disorders in Pregnancy.

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Eating Disorders are common psychiatric disorders, and their occurrence is not rare in pregnancy. The aim of this presentation will be to provide an overview of eating disorders in pregnancy. I will first cover prevalence and nature of eating disorders and their symptoms in pregnancy. I will present quantitative and qualitative data from my own research. I will then present research on the effects of eating disorders on pregnancy and obstetric outcomes. I will conclude discussing issues around identification of eating disorders in pregnancy; in particular research from my lab on gaps in identification, and how to improve identification of eating disorders in pregnancy.

Disclosure: No significant relationships.

Keywords: post-partum; Eating Disorders; identification; Pregnancy

S0025

Reviewing Evidence for the Usefulness of Family Interventions for Depression During and After the COVID-19 Pandemic

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There has been a significant increase in the incidence of depression in countries around the world during the COVID-19 pandemic. Identified concerns include: loss of family members, fear of gettin sick, finances, decreased social connections, deteriorating relationships at home and decreased ability to practise previously helpful coping skills. Family/couples intevrentions alone or in combination with individual therapy and/or pharmacotherapy have been shown to be helpful in diminishing symptoms of depression and in improving family functioning. This presentation will review evidence examining the effctiveness of family/couples therapy in treating adults with depression and outline therapy processes that have been shown to be effective.

Disclosure: No significant relationships.

S0026

The Usefulness of Telemedicine in Perinatal Mental Health Services During and after COVID-19 Pandemic. Detailed Experience of the Team of "Together" Baby-Mother-Father Unit in Budapest.

T. Kurimay^{*}, T. Fenyves, J. Szederkényi, G. Mező and A. Pelikán North Centre Buda New Saint John Hospital and Oupatient Clinic, Buda Family Centre Mh Centre Department Of Psychiatry, Teaching Dep. Of Semmelweis University, Budapest, Hungary *Corresponding author. doi: 10.1192/j.eurpsy.2022.79 Due to the nature of the perinatal period, it affects generations who are more at home in the electronic space, hence some form of telemedicine can be used in a number of areas. The "Together" Baby-Mother-Father Integrated Program has been running since 2004. Both the condition of those affected and the current epidemic makes it difficult for patients and their families to access adequate perinatal specialist care. At the beginning of the epidemic, the switch to telemedicinal psychiatric care has been rapid and focused mainly on the use of Phone, Skype, Viber and Email. To our findings the advantages include, easier access to care, and more frequent contacts. The home environment is accessible and the families are more involved. Also, care does not compete with the scarce resources of time and space. Some of the possible disadvantages are, that more work on intimacy is needed, and the treatability of certain diseases is questionable (e.g., psychoses). Care is less documentable with the current regulations, and funding has not vet been adapted to the changes. The telemedicinal care and support network in Hungary - among many - contains an online medical system (EESZT) including e-prescription. Online- psychotherapy, consultation, peer-group platforms. There is a non-stop hotline for patients, etc. In 2021 the total number of our cases increased by 34%, but realistically the visit number was also higher, due to the amount of shorter telephone and e-mail interactions. Depression and bipolar disorder were among the highest proportion by the patients present.

Disclosure: No significant relationships.

Keywords: Telementalhealth; Usefullness of e-platform for perinatal women; Effective tool during Pandemic; Baby-Mother-Father programme

Lifestyle: Can Exercise, Diet, or Music Prevent and Improve Psychiatric Disorders?

S0027

Effects of Exercise in People with Severe Mental Illness and Recommendations for its Implementation as Addon Therapy

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There are many reasons for people with (and without) severe mental illness to exercise regularly. In people with schizophrenia, major depression and bipolar disorder, it has already been shown that regular physical activity as an add-on therapy can improve quality of life and symptom severity. This is particularly important in domains that standard therapy is currently not able to treat sufficiently, such as cognitive deficits. Postulated underlying neurobiological effects include increased volume in hippocampal areas as demonstrated by data of a current clinical trial in people with schizophrenia.

Furthermore, regular exercise is essential to counteract the increased cardiovascular morbidity and mortality of people with severe mental illness. However, most people with severe mental illness do not achieve the recommended amount of physical activity and the potential of exercise as an add-on therapy is currently not even close to being fully realized. On the one hand, it is important that mental health staff also considers the physical condition of patients with mental illnesses and counsels them on their health behavior. On the other hand, there is a need for individually adapted training programs delivered by qualified exercise professionals that incorporate motivational and adherence strategies. Examples of barriers and facilitators for the implementation of exercise as an add-on therapy are discussed on the basis of current local projects.

Disclosure: No significant relationships.

Keywords: exercise; physical activity; schizophrenia; bipolar disorder; major depression

S0028

The Role of Music in Treating Psychiatric Symptoms

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Music therapy can be defined as the controlled use of music or musical elements by a qualified therapist with a client or a group of clients. The active or passive delivery of musical therapy may facilitate the development of individual potential and/or restore psychological functions of the individual, allowing to obtain better interpersonal, physical, and psychological functioning. Indeed, existing literature suggested that music therapy holds a significant therapeutic potential in a number of psychiatric disorders, including psychosomatic, anxiety and affective syndromes. More recently, evidence concerning the potential of music as a mean to increase group cohesion, acceptance, interpersonal relationships in psychiatric settings has highlighted the potential to improve the patient's global functioning, social functioning, mental state, and positive/ negative symptoms of psychoses. Traditionally, music therapy is delivered in controlled outpatient setting and few evidence point to a possible role in the treatment of acute psychoses, during their hospital stay. Recently, newer evidence has recently piled up and showed that music therapy can induce clinical (in particular, on affective symptoms), functional and quality of life improvement in patients with acute psychoses, even over a short period of time such as during emergency hospitalization. The reported effects might be related to complex neural modulation phenomena involving different interhemispheric, cortical and subcortical brain pathways. Practical clinical experiences, setting or implementation issues and quality standards in music therapy will also be discussed.

Disclosure: No significant relationships.

Keywords: music therapy; psychosis; severe mental illnesses