

Conclusion. KardiaMobile devices are faster to use and as/more tolerable in a dementia ward setting than 12-lead ECGs. The ECG trace is fed back instantly to the mobile device, however, automatic interpretation is limited and QTc calculation relies on the operator. Visual inspection of QTc can be difficult, and unreliable. However, the combination of two different raters led to more reliable results. The device has potential for use in this setting, however, an increase in automatic interpretation, or interpretation by a third party such as with Broomwell Health Watch, would increase its usability.

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Prevalence of Depression Amongst Adult Hemophilia Patients Registered With Hemophilia Foundation of Zambia

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Aims.

Main Objective

To assess the prevalence of depression (major depression) amongst adult hemophilia patients in Zambia.

Specific Objectives

1. To assess the prevalence of depression amongst adult hemophilia patients in Zambia using the Patient Health Questionnaire 9 (PHQ9) tool to screen for/diagnose depression.
2. To determine risk factors, amongst hemophilia patients, to developing depression.
3. To ascertain factors that significantly associate with depression amongst adult patients with hemophilia in Zambia.

Methods. This was a quantitative cross-sectional study, conducted by administering the study questionnaire to collect data on demographic characteristics, clinical characteristics and the Patient Health Questionnaire – 9. A total of 59 adult patients with Hemophilia in Zambia, registered under the Hemophilia Foundation of Zambia were interviewed through the questionnaire. The data were analyzed using STATA 14. Descriptive analyses were done on the data, responses on PHQ-9 were totaled to assess for the prevalence of depression. Depression was defined as PHQ-9 ≥ 5 ; Major Depression as PHQ-9 ≥ 10 . Pearson Chi-2 test was done to assess for associations and a logistic regression model was created to show the relationship between significant risk factors (independent variables) and depression.

Results. 59 participants were interviewed in this study. They were all male with an average age of 24.77 years from various parts of Zambia. 91.53% of the patients reported to have Hemophilia A, while 8.47% had Hemophilia B, there were no patients with Hemophilia C. The average PHQ-9 score was 8.66. 83.04% of participants had depressive symptoms (PHQ > 5); 44.06% having major depression and only 16.96% of the participants reported no depression. Number of painful bleeding episodes (OR = 2.063; P = 0.048) and difficulty in performing daily activity (OR = 4.311;

P = 0.008) were significantly associated with a higher risk for major depression.

Conclusion. There was a high prevalence of major depression (44.06%) amongst adult patients with hemophilia registered under the Hemophilia Foundation of Zambia. Hence there is need for addition of mental health care to the multidisciplinary management of adults with hemophilia for improved health outcomes due to the high prevalence of depression amongst this group. Additionally, patients who suffer many painful bleeding episodes must be prioritized candidates for mental health care.

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Knowledge of Psychogenic Polydipsia Within Mental Health Services

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Aims. Psychogenic polydipsia (PP) is a term used to describe a repetitive behaviour that characterises compulsivity in psychiatric patients resulting in excessive fluid consumption. It is a common clinical problem in patients with severe mental illness, learning disability, autism and acquired brain injury. Up to 20% of patients with schizophrenia have polydipsia, and many develop hyponatraemia and water intoxication, which can lead to irreversible brain damage or death.

Psychogenic polydipsia may not be obvious to staff in a busy care setting, leading to delayed identification and appropriate care.

The objective of this study is to assess the existing knowledge of psychogenic polydipsia among mental health staff and promote greater awareness of the condition.

Methods. To investigate the understanding of psychogenic polydipsia among healthcare staff, an online survey has been chosen as the research method. This survey will help identify any knowledge deficiencies in this area. It consists of both closed and open-ended questions, allowing for quantitative and qualitative analysis. The open-ended questions are designed to provide an opportunity for participants to share their individual experiences. Additionally, the survey will collect information on participants' age groups, years of experience in mental health services, and level of expertise. The survey was created using Qualtrics online survey software. Participant recruitment will be conducted at St Matthews Healthcare, with an estimated sample size of n = 101. The collected data will be analysed using statistical software such as SPSS, NVivo, or other appropriate tools.

Results. The results of this study will be presented. Data are being collected and analysis will be completed in March. The abstract will be updated. These findings will serve as the basis for future recommendations and suggestions.

Conclusion. Comprehending patients' illnesses is a crucial aspect of providing quality healthcare. However, identifying psychogenic polydipsia has proven to be challenging within mental health