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Methods: We retrospectively assessed the employment outcomes of 79 consecutively evaluated patients. Patients were referred at the inception of an FND Program for adults. The majority of patients were unemployed, on sickness leave and or disability benefits at the time of their referral (n=71). Their median age was 48 years. Most patients were of female gender (n=50), in a relationship (n=53), with no dependants (n=64). Most patients had a referral diagnosis of mixed functional neurological symptoms (n=35), presenting with a combination of motor, sensory, cogniform or dissociative seizure symptoms. Among patients distinct phenomenological presentations, the most common referral diagnosis was functional sensory disorder (n=16). Twenty two patients had a concurrent structural neurological disorder. Seven patients had an accident compensation claim, and twenty had a workers' compensation or employment insurance claim at the time of referral.

Results: Approximately 30 % of patients were able to return to some work (n=24) within five years or less, and all those who were in employment at the time of the referral continued to hold a job for the duration of their treatment. We identified a negative correlation between patients' ability to return to work and the length of employment interruption, with patients more recently out of work (within a year prior to the referral) being most able to return to work (odds ratio = 2; 95% CI, 1.2 to 3.8). We previously analyzed employment figures at 18 months of the service operation. Return to work was moderately lower at that point at 19%, but with maintained negative correlation with the length of employment interruption.

There was a negative correlation between having a work-related financial claim and the ability to return to work (p <0.001). There was no statistically significant correlation between demographic variables (gender, age, relationship status, or having dependants) and the ability to return to work, nor was there a statistically significant correlation between the phenomenology of Functional Neurological Disorder (motor, sensory, cogniform, non-epileptic attack disorder or mixed) and the ability to return to work.

Conclusions: Early and continuous treatment of employed or recently unemployed patients with Functional Neurological Disorder is associated with better occupational outcomes. Having a work-related compensation claim is correlated with negative occupational outcomes. There is a need for further research into occupational rehabilitation, specially for patients receiving work-related compensation claim.

Disclosure of Interest: None Declared

EPV0890

Sensorimotor accuracy and dynamic muscular endurance in war veterans (amateur athletes) during rehabilitation after battle trauma

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Introduction: During the war, the rehabilitation of combatants after injuries of varying degrees of complexity has particular

importance. The effectiveness of rehabilitation of athletes-war veterans can be assessed by the level of physical performance, functional properties and state of all body systems. The reduction of functional asymmetry, accuracy of the sensorimotor response and dynamic muscular endurance (DME) of hand movement by the tapping test are effective and objective indicators of physical rehabilitation.

Objectives: The aim of this study was to evaluate functional asymmetry, accuracy of sensorimotor response and dynamic muscular endurance of hand movement by tapping test during the rehabilitation of amateur field-and-track athletes after battle traumas.

Methods: 10 war veterans (amateur field-and-track athletes, righthanded male aged between 28 and 60 years) took part in the study. To determine the state of psychophysiological functions and the maximum tempo of movement of the hand Diagnostic complex "Diagnost-1" (Ukraine) was used. We analyzed indicators of the tapping test, indicators of a simple visual-motor reaction (SVMR) and a reaction of choosing one of three signals (RCh1-3) separately for the right and left hand, indicators of a reaction of choosing two of three signals (RCh2-3). Non-parametric statistics methods (Spearman's rank correlation coefficient) were used to process data. **Results:** The accuracy of the sensorimotor reaction (according to the SVMR indicators) corresponded to the average level in the majority of athletes (60%). The indicators of the simple response of the choice of RCh1-3 were below the average (20%) or at a reduced level (50% of the examined). DME of the dominant hand was high or medium in 40% and 60% participants respectively. In 90% of the surveyed athletes, asymmetry in terms of the tapping test is moderately expressed. Results showed the significant correlation between the stability index of the simple visuomotor reaction (SVMR) and the dynamic muscular endurance (DME) indicators for the dominant and subdominant hand (r = 0.75, r = 0.71, p<0.05, respectively) - the greater DME corresponded to the lower stability of the SVMR. Latency periods of simple visuomotor reaction and their components (motor components of SVMR, RCh1-3, RCh2-3 reactions and the time of central processing of information in choice reactions) were not associated with tapping test indicators. **Conclusions:** Therefore, it can be assumed that motor components of a simple visuomotor reaction, choice reactions and the time of central processing of information in choice reactions were not related to dynamic muscle endurance. The revealed interrelations between the stability of the sensorimotor response and the dynamic muscular endurance of the hand movement can be indicators of the successful rehabilitation of amateur athletes after injury.

Disclosure of Interest: None Declared

EPV0891

Evaluation of the effectiveness of psychosocial treatment of patients with schizophrenia at different stages of its rendering

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Introduction: Currently, there is an active introduction of modern types of psychosocial treatment (PST). At the same time, an

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important direction is the evaluation of the effectiveness of PST, the identification of factors affecting it, which determines the urgency of research in this area.

Objectives: To evaluate the effectiveness of psychosocial treatment of patients with schizophrenia at different stages of psychiatric care; to build regression models to identify factors that influence the effectiveness of psychosocial treatment.

Methods: Clinical and psychopathological, statistical, as well as a battery of tests: PANSS, CGI; Drug Attitude Inventory (DAI, Hogan T.P. et al., 1983); Insight Scale for Psychosis (ISP, Birchwood M., 1994); «SF-36 Health Status Survey» (SF-36, Ware J.E. et al., 1993); URICA (McConnaughy E.A. et al., 1983); The Social Adjustment Scale-Self (SAS-SR, Weissman M, Bothwell S.,1976); PSP (Morosini P.L. et al., 2000) and a number of other scales. 90 patients with schizophrenia in the community, inpatient department of psychiatric hospital, day hospital participated in the basic PST program, which included psychoeducation, motivational training, social and cognitive skills training. At each stage, PST was received by 30 patients who did not differ significantly in age and other socio-demographic characteristics, but were characterized by different quality of remission, the duration of the PST program was 3 months. The assessment of the patients' condition was carried out before and after the rehabilitation program.

Results: A significant improvement in the indicators on the PANSS scale was found in patients of all three groups, as evidenced by a reduction of more than 10 points in the total score of the scale. As a result of the PST program, patients of all three groups have improved to varying degrees their awareness of the disease understanding of the need for drug treatment, increased motivation, and have shown a tendency to improve a number of cognitive functions. The participants of the program demonstrated an increase in the level of activity and purposefulness of activity, as well as the ability to master new social skills and implement them. Correlation and regression analysis, during which more than 100 factors were studied, allowed us to identify the most significant factors that positively or negatively affected the effectiveness of PST: severity of the condition, duration of illness, age of onset of the disease, age of referral to the service, number of hospitalizations, type of remission, observation group, level of education, marital status, family support, family relationships, having friends, having income.

Conclusions: The effectiveness of the basic PST program has been shown. However, the work on evaluating the effectiveness of the PST should be continued, especially for the development of information criteria and a tool for its evaluation.

Disclosure of Interest: None Declared

EPV0892

The development and implementation of trauma, posttraumatic growth and trauma-informed rehabilitation course for psychiatric personnel-case study

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Introduction: The National School for Training in Mental Health Rehabilitation and Recovery at the Ono academic college operates under the auspices of, and is funded by, the Division for Mental Health Rehabilitation of the Israeli Ministry of Health. Intended to hone the quality of services provided, it offers numerous training courses, that target various populations associated with and working in the field of mental health recovery, among them clients and their family members, as well rehabilitation professionals and support personnel. The novel course of trauma and posttraumatic growth (PTG) was developed and aimed at supporting recovery, coping strategies and ultimately PTG through the lenses of both recovery and trauma informed care for psychiatric and support personnel, professionals with lived experience, and family members. It is built of eleven six hours long sessions with lectures, in-vivo assignments, and group supervision.

Objectives: Portray the development, implementation, and outcomes of the course from psycho-educational, clinical, social, and personal perspectives of students as well as the course's developers. **Methods:** A case study of the course that will be portrayed through qualitative anonymous testimonials from students' surveys and assignments, as well as the analyses of processes that the course underwent through the years.

Results: The course has several dimensions that allow the integration between trauma, recovery, and PTG in psychiatric rehabilitation: the integration between academia and research-based knowledge with experiential knowledge; integration between the perspectives of PTG and recovery; and, integration between social and cultural perspectives and person-centred care. In addition, the course promotes trauma-informed models in psychiatric rehabilitation; offers new perspective and implantation to psychiatric recovery-oriented tools so as to promote PTG; and enhances social support and cohesion within mental health services and personnel. **Conclusions:** The current case study portrays the unique processes of knowledge development, implementation, and training in psychiatric rehabilitation personnel, supported staff and people with lived experience. The course brings a focus on PTG as a promising addition to the trauma-informed approach in psychiatric rehabilitation, which is only scarcely linked to recovery.

Disclosure of Interest: None Declared

Research Methodology

EPV0893

Prospects for the use of artificial intelligence methods in autism spectrum disorders

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Introduction: ASD is a heterogeneous group of pathological conditions

Objectives: Sensory Functions in Children with Autism

Methods: A brief review of scientific publications is presented, formed by the search result for the keywords: autism spectrum disorders, artificial intelligence, machine learning.