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should establish a specific ADHD-focused CBT approach and have more extended follow-up periods to understand long-term effectiveness. This review also identifies priority areas for additional research.

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#### Understanding Perceptions of Mental Health Practitioners on Care and Treatment Reviews (CTRs)

Dr Ayomipo Amiola<sup>1\*</sup>, Ms Verity Chester<sup>1,2</sup>, Dr Kiran Purandare<sup>3</sup>, Professor Rohit Shankar<sup>4,5</sup> and Professor Regi Alexander<sup>1,6</sup>

<sup>1</sup>Hertfordshire Partnership University NHS Foundation Trust, Norwich, United Kingdom; <sup>2</sup>RADiANT, Norwich, United Kingdom; <sup>3</sup>The Learning Disabilities Directorate Central and North West London Foundation NHS Trust, London, United Kingdom; <sup>4</sup>Cornwall Partnership NHS Foundation Trust, Plymouth, United Kingdom; <sup>5</sup>Peninsula School of Medicine, University of Plymouth, Plymouth, United Kingdom and <sup>6</sup>University of Hertfordshire, Hatfield, United Kingdom

\*Presenting author.

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Aims. NHS England's 'Transforming Care' initiative introduced care and treatment reviews (CTRs) for adults with intellectual disabilities and/or autism to avoid inpatient admissions, improve inpatient care quality and support timely discharge. CTRs are completed by an independent panel including an expert by experience, a clinician, and the commissioner. Since 2015, thousands of CTRs have been carried out. In a survey of ID psychiatrists involved in CTRs, many felt that discharge planning was limited by a lack of appropriate community placements. Proposed changes to the Mental Health Act indicate that CTRs should become statutory.

Our aim was to obtain the views of professionals working in intellectual disability services on the proposed reforms to the Mental Health Act and CTRs.

**Methods.** A mixed methods 34-item questionnaire exploring views of professionals working in ID services (n=66) on the CTR process, their perception on its usefulness and the proposal to make CTR recommendations statutory. Survey shared with ID MDT professionals working in the UK. Of the respondents, 30% were psychiatrists, 29% psychologists and 21% nurses, with average length of mental health service of 18.2 years. More than 80% work in the NHS and most worked either in inpatient or forensic units.

Results. Although in 80% of CTRs attended, patients have a current risk assessment and management plan, in less than 10% of CTRs attended were people ready for discharge and had a current discharge plan. In terms of CTR actions, 70% of the time, patients were receiving the right care, over 60% of the time, care was person centred, person's health needs are met and 50% of the time key areas of concerns were covered. In less than 40% of CTRs were the person's rights always upheld, family or carers always involved, medications being used appropriately or were there clear, safe and positive approaches to risk. Reasons for delayed discharges included no placement options (68%), no placement profile or community needs assessment (24%), placement funding disputes (23%), no agreed social care responsibility (18%) and no

agreed community clinical care responsibility (18%). Only 7% of respondents felt CTRs were always useful, 44% felt they were sometimes useful and 23% often useful. Professionals had mixed views about whether CTRs should become statutory/enforceable (45%) versus those who did not (48%).

**Conclusion.** This is a survey with a relatively representative sample of MDT professionals involved in CTRs. It gives insight into the typical CTR process, duration, and professionals involved. It summarises the opinions of clinicians towards CTRs and their views on proposed changes.

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# The Effectiveness of Antipsychotic Drug Therapy for Treating Psychosis in People With Epilepsy – a Systematic Review

Mr Aryan Arora\*, Ms Priya Prakash, Ms Laura Rizzo and Dr Jonathan Rogers

UCL, London, United Kingdom \*Presenting author.

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Aims. Individuals with epilepsy are at risk of developing preictal, ictal, postictal or interictal psychoses. Antipsychotic drugs (APDs) are the main class of drugs used to treat psychosis and schizophrenia. The efficacy and safety of APDs as a treatment for epileptic psychosis is not well understood. Hence, we aimed to conduct a systematic review assessing the effectiveness and adverse effects of antipsychotic drugs to treat psychosis in people with epilepsy.

Methods. We adhered to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. We searched MEDLINE, Embase, PsycInfo and AMED from database inception to 20/06/2023. We contacted experts in the field and performed citation searches to identify additional records. Title, abstract, full-text review, and data analysis were conducted in duplicate, with conflicts resolved by discussion among authors. Given the heterogeneity of study designs, meta-analysis was not deemed appropriate; instead, the results were tabulated in a narrative synthesis. The Joanna Briggs Institute Risk of Bias tool was used to assess study quality.

**Results.** We identified 13 studies, with a total of 1,180 participants. In the 9 case series included, the psychotic symptoms of all but 3 out of 28 patients treated with APDs partially improved or fully resolved. 3 of the cohort studies reported an association between antipsychotic use and longer duration of psychotic episodes, 2 found similar results in both APD and non-APD groups, and 2 did not report control psychosis outcomes. When reported, seizure frequency was observed to remain unchanged or decrease following APD treatment.

**Conclusion.** Available evidence does not suggest that antipsychotics increase seizure risk in individuals with epilepsy. However, further data from randomised controlled trials and well-controlled cohort studies are urgently needed to draw more definitive conclusions.

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### Perceived Stress and Food Consumption Among Pakistani Medical Students – a Survey Study

Mr Saad Azam<sup>1\*</sup>, Ms Haania Shahbaz<sup>2</sup> and Dr Fiza Azam<sup>3</sup>
<sup>1</sup>Shaikh Khalifa Bin Zayed Al Nahyan Medical & Dental College, Lahore, Pakistan; <sup>2</sup>Dow Medical College, Karachi, Pakistan and <sup>3</sup>Dorset County Hospital, Dorchester, United Kingdom \*Presenting author.

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**Aims.** The aims of this study included investigating the relationship between perceived stress levels and food consumption patterns amongst Pakistani medical students. Additionally, the study meant to determine whether there is a significant difference in food choice between high-stress and low-stress groups of students. Lastly, the study aimed to identify the specific food types most commonly consumed by medical students under high stress conditions.

The investigators of this study hypothesised that there is a significant difference in food choices between high-stress and low-stress groups of medical students.

Among the common health problems reported by medical students, stress stands out as one. Factors related to educational and psychological domains result in the development of stress. Changing dietary patterns is a commonly employed strategy used to deal with stress.

**Methods.** This study utilised an online survey administered among medical students across Pakistan. The data collection period was 4 weeks from 5th July to 5th August 2023. The survey was distributed conveniently using social media platforms. Sampling was done via the snow-ball method. Data analysis was done via SPSS.

**Results.** Our results from the population of 138 females (68.6%) and 63 males (31.3%) concluded that there were no significant differences in the perceived stress score between genders (p-value = 0.377) and between hostelites and non-hostelites (p-value = 0.816) using the Mann–Whitney test. We found statistically significant differences in the perceived stress score among the different frequencies for the consumption of snacks (p = 0.02) and fast foods (p = 0.008), but the stress score remained non-significant for fruits and vegetables (p-value = 0.089), ready-to-eat foods (p-value = 0.134), and sweets (p-value = 0.051) with the Kruskal–Wallis test.

**Conclusion.** While previous studies have shown a difference in perceived stress across genders and living arrangements, ours found none. In addition, we found snacks and fast foods to be the go-to for students in times of stress, but the consumption of healthier foods was not associated with a lower level of stress.

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### Development and Preliminary Testing of App-Based Culturally-Adapted Psychoeducation for Bipolar Disorder in Pakistan

Ms Muqaddas Asif<sup>1,2</sup>, Mr Ameer B. Khoso<sup>1,2</sup>, Prof Nasim Chaudhry<sup>1</sup>, Prof Imran B. Chaudhry<sup>3,2\*</sup> and Dr Muhammad Ishrat Husain<sup>4,5</sup>

<sup>1</sup>Pakistan Institute of Living and Learning, Karachi, Pakistan; <sup>2</sup>University of Manchester, Manchester, United Kingdom; <sup>3</sup>Ziauddin University, Karachi, Pakistan; <sup>4</sup>Centre for Addiction and Mental Health, Toronto, Canada and <sup>5</sup>University of Toronto, Toronto, Canada

\*Presenting author.

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Aims. Bipolar disorder (BD) leads to marked disability, morbidity, and premature death. Although pharmacological agents are an essential part of BD treatment, psychosocial interventions have played an important role in enhancing treatment adherence, functioning and quality of life in patients with BD. Building on a successful pilot randomised controlled trial (RCT) of a Culturally adapted PsychoEducation (CaPE) intervention for BD, CaPE is currently being evaluated in a large multicenter RCT for its clinical and cost-effectiveness across Pakistan. However, innovations are urgently needed due to limited human resources and disproportionately high clinical needs to bring effective interventions to scale. This study aims to develop and test a mHealth iteration of CaPE, digital CaPE (dCaPE), to be delivered via a mobile app.

**Methods.** The study will utilise a two-phased approach to i) develop a user-centred dCaPE mobile application and ii) assess the feasibility and preliminary efficacy of dCaPE for people with BD in a randomised controlled trial in Pakistan. For application development, we have conducted discussion groups with stakeholders i.e., mental health professionals (psychiatrists, psychologists, nurses) (n=8) and patients and carers (n=10) to gauge their valuable insights for app design, visual elements, cultural sensitivity, motivational and mood-monitoring features, and app functionality to improve user experience.

Results. The findings from discussion groups informed the importance of visual elements, specifically font size and style. Participants recommended the use of soft and soothing colours like white, grey, and soft shades of pink to prevent overstimulation. Additionally, participants highlighted the need for culturally and linguistically inclusive features, including emojis and audio messages for effective engagement and to address the challenge of low literacy. The mHealth approach was deemed highly valuable, especially given the prevalence of mental health challenges and associated stigma. Endorsed by participants, the dCaPE application will offer customized psychoeducation messages along with daily 5-item (mood, energy, sleep, medication, and irritability) screening, a weekly comprehensive test for manic and depressive episodes based on DSM-5 criteria; weekly reminders to regulate sleep and eating habits, and visual representations of weekly mood monitoring reports with the incentive of badges or rewards for goal achievers.

**Conclusion.** This research has the potential to enhance clinical outcomes, social and occupational functioning, and the overall quality of life for BD patients while addressing substantial mental health treatment gaps with impact and implications extending to various low-resource settings.

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## Review of Published ECTAS Data Set From 2012/2013 to 2021

Dr Vellingiri Raja Badrakalimuthu\*

Surrey & Borders Partnership NHS Foundation Trust, Guildford, United Kingdom

\*Presenting author.

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**Aims.** Electroconvulsive Therapy Accreditation Service (ECTAS) publishes minimal data set collected from ECT services subscribing to ECTAS accreditation. The aim of this study is to review minimal data set published by ECTAS towards understanding