relevant adverse incidents such as violent behavior, relapse, escape and reoffending. The data was analyzed descriptively.

Results: 15 of the existing 46 FCDD participated in our study (33%). In total, 2483 patients were treated in the participating FCDD, 18% of the patients were relocated into prison due to treatment termination and 15% were discharged successfully. 275 adverse incidents were reported: violence against a patient (4%), violence against staff (1,6%), escape (4,7%) and reoffending (0,5%). Merely in seven FCDD treating 1153 patients, an OST was availabe. Available options included buprenorphine/naloxone, buprenorphine, methadone and levomethadone. Regarding adverse incidents and successful discharge, no differences were detected in the clinics with or without an OST. In the clinics that offered an OST, we found a significantly higher rate for treatment termination without success (p<0.007) in comparison to clinics without this program. 99 patients received an OAT and this treatment was ended due to illegal drug abuse (57%), refusal to give an urine drug sample (71%) and in cases were the OAT was given away to other patients (85%).

Conclusions: Surprisingly, opioid substitution therapy is only accessible in a part of the FCDD in Germany. Reasons for this are unclear. Critical incidents such as violent behavior against staff/patients and escape are not uncommon in this forensic psychiatric treatment setting. Further studies are needed to enhance the understanding of the limited OST practice and the risks for patients and staff in this specific forensic treatment setting.

Disclosure of Interest: None Declared

EPP0848

Aggressive behavior and severe mental disorders in Prison psychiatry

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Introduction: Aggressive behavior can be understood as a compelx and social phenomenon. A number of studies have shown that the risk of aggressive behavior is increased for patients with severe mental disorders such as schizophrenia. Although specialized forensic institutions exist in many countries, most offenders with mental disorders are still found in prison settings what corresponds to international literature suggesting an increased prevalence of mental disorders in prison inmates. Still, data on the specific characteristics of patients demonstrating aggressive behavior in medical and mental health settings is limited, especially for prison environments.

Objectives: The aim of our study was to identify patient characteristics that are potentially associated with aggressive incidents in a prison psychiatric setting.

Methods: In routine documentation in German prisons, specific incidents, as e.g. aggressive behavior are reported through an official reporting system. Analyzing these official reports, we collected all aggressive incidents concerning at the Department of Psychiatry of the Berlin prison hospital between 1997 and 2019. In addition, for each patient acting aggressively, we collected data on an equal number of patients who did not demonstrate this behavior during their hospital stay. For those patients with more

than one inpatient treatment period, only the first stay in the prison hospital was included. Furthermore, patients were excluded based on age (younger than 16 or older than 70) or death during treatment. The statistical data was analyzed descriptively.

Results: In total, 225 treatment episodes were included of which in 118 cases violent behavior were documented. The items older age, German citizenship, previous violent crimes (OR = 0,40, 95 % KI: 0,35 – 1,17) and antipsychotic (OR = 0,28, 95 % KI: 0,14 – 0,55) or antidepressant (OR = 0,35, 95 % KI: 0,13 – 0,88) treatment within six months prior to admission had a rather protective effect on the occurrence of aggressive behavior during inpatient treatment. Alcohol (OR = 1,21, 95 % KI: 0,64 – 2,27) and drug use disorders (OR = 2.18, 95 % KI: 1,09 – 4,44) tended to be risk factors for aggressive behavior. Thus, the results in this prison psychiatric population correspond to the risk factors described in the literature.

Conclusions: The reported results point in the direction that optimising the availability of psychopharmacological treatment options and offering specialized treatment for patients with comorbid substance use disorder may lead to the prevention of aggressive behavior in patients with a schizophrenia diagnosis.

Disclosure of Interest: None Declared

EPP0849

Influence of psychpathic personality traits on anxiety in a mixed reality Study

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Introduction: The personality construct of psychopathy consists of severe deficits in behavior, emotion and cognition, often categorized in the two dimensions affective-interpersonal and antisocial-lifestyle. Research indicates that a lack of anxiety and fear play an important role in psychopathic personalities. Understanding the interplay of psychopathic traits, fear and threat processing and reactive behavior is important due to its implications for risky and potentially antisocial behavior.

Objectives: We conducted a mixed reality study using the elevated plus-maze in a non-clinical sample to test anxiety-related behavior in correlation to psychopathic personality traits. Our hypothesis was that higher psychopathy would lead to higher expression of risky behavior and, thus, to longer time on open arms, higher number of entries to open arms and reduced latency for a first visit on open arms and for open arm endexploration.

Methods: Healthy volunteers were recruited (N=170) and completed the Sensation Seeking Scale V (SSSV), the Acrophobia Questionnaire (AQ), and the Brief Questionnaire of Psychopathic Personality Traits. The included subjects were tested on the human elevated plus-maze, which consists of a physical life-sized wooden platform and its representation in a virtual environment. Data recording was performed via the virtual reality tracking system (HTC Vive Base Station®, Seattle, USA) and custom soft-ware (A+ cross®) using the following parameters: total time spent on open arms (time on open arms), number of entries to open arms,

latency for the first entry of an open arm (latency 1st visit) and time until subjects reach the end of an open arm (latency endexploration).

Statistical analyses were carried out using IBM SPSS Statistics 23.0 (IBM Corp., Armonk, NY, USA) and R software (R version 4.0.2). Pearson correlation was performed to assess associations between psychopathic traits and measures of anxiety-related constructs.

Results: Reduced levels of anxiety were associated with higher psychopathic traits. This was reflected in a correlation between the PPT sum score and all measures of anxiety-like behavior on the EPM (time on open arms: R = .29, p < 0.001; number of entries to open arms: R = .32, p < 0.001; latency 1st visit: R = -.29, p < 0.001; latency endexploration: R = -.30, p < 0.001). Psychopathic traits were also negatively correlated with subjective levels of anxiety on the EPM (R = -.23, p = 0.004). Sensation seeking (SSSV) (R =.33, p < 0.001) but not general levels of acrophobia (ACQ) (R = -.13, p = 0.11) were moreover associated with psychopathic personality traits.

Conclusions: In light of the ongoing discussion, our results demonstrate a correlation between psychopathic personality traits and anxiety-related behavior in a non-clinical sample. This supports the theory of a lack of fear in psychopathy and may influence risky and potentially harmful behavior in this population.

Disclosure of Interest: None Declared

EPP0850

Profile of forensic patients hospitalized in psychiatry

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Introduction: The question of violence and dangerousness is a central subject in psychiatry, since it is a source of stigmatization for many patients and represents a major element of medical, legal and social care. Violence being defined as: "the deliberate use or threat of deliberate use of physical force or power against oneself, against another person or against a group or community, which results in or is very likely to lead to trauma, death, moral damage, maldevelopment or deficiency". The violent character of the mentally ill was among the precursors to the discussion around the first therapeutic measures for the mentally ill. A better knowledge of the risk factors for the passage to a violent act in mental disorders is therefore necessary for the development of therapeutic and preventive strategies.

Objectives: The objective of our work is to determine the sociodemographic, clinical and criminological characteristics of forensic patients and to seek the predictive factors of violence in these patients.

Methods: This is a retrospective study spread over 10 years on a series of forensic patients who were hospitalized at the Ar-razi psychiatric hospital in Salé (Morocco). The collection of data was carried out from clinical observations, psychiatric expertise and an exploitation sheet.

Results: Numerous studies have defined subgroups of patients at risk. Factors such as positive symptoms, poor treatment compliance, and comorbidities such as substance use disorders or antisocial personality traits have been described as predictive of violence.

Conclusions: The prevention of medico-legal acts must take into consideration these associated factors, in particular early management of the disorders, improvement of therapeutic observance and family care.

Disclosure of Interest: None Declared

EPP0851

Criminal behaviors and substance abuse in psychiatric patients

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Introduction: People with mental illness are overrepresented throughout the criminal justice system. In Italy, an ongoing process of deinstitutionalization has been enacted: the Judicial Psychiatric Hospitals are now on the edge of their closure in favor of small-scale therapeutic facilities (Residenze per l'Esecuzione delle Misure di Sicurezza - REMS). Law 81/2014 prescribes that a patient cannot stay in a REMS for a period longer than a prison sentence for the same index offense. Therefore, when patients end their duty for criminal behaviors, their clinical management moves back to outpatient psychiatric centers. Elevated risks of violent behavior are not equally shared across the spectrum of psychiatric disorders. In the past several years, multiple studies in the field of forensic psychiatry confirmed a close relationship between violent offenders and comorbid substance abuse.

Objectives: In order to broaden the research in this area, we analyzed sociodemographic, clinical and forensic variables of a group of psychiatric patients with a history of criminal behaviors, attending an outpatient psychiatric service in Milan, with a focus on substance abuse.

Methods: This is a cross-sectional single center study, conducted in 2020. Seventy-six subjects with a history of criminal behaviors aged 18 years or more and attending an outpatient psychiatric service were included. Demographic and clinical variables collected during clinical interviews with patients were retrospectively retrieved from patients' medical records. Appropriate statistical analyses for categorical and continuous variables were conducted.

Results: Data were available for 76 patients, 51,3% of them had lifetime substance abuse. Lifetime substance abuse was significantly more common in patients with long-acting injectable antipsychotics therapy, >3 psychiatric hospitalizations, history of previous crimes and economic crime (Table 1). Additionally, this last potential correlation was confirmed by logistic regression.