evidenced improved patient engagement, clinician empowerment and the preference of POCT over traditional blood tests in this setting.

Conclusion. POCT is associated with improvements in the rate and quality of physical health checks, and this study emphasizes the potential of POCT in reducing health inequalities and enhancing holistic care for individuals living with severe mental illness.

Metabolic Syndrome, Sleep Quality and Lung Function in Persons With Schizophrenia: A Cross-Sectional Study

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Aims. Persons with schizophrenia typically have a 20% shorter lifespan and mortality rates two times higher than the general population. More than 2/3 of this is due to different forms of physical diseases, like cardiovascular and metabolic syndrome. Systematic meta-analyses and various studies in schizophrenic patients revealed the prevalence of metabolic syndrome to range from 11 to 69%, poor sleep quality 30% to 80%, and impaired lung function ~30%. Both in the general population and in persons with schizophrenia, poor sleep quality and impaired lung function are associated with a heightened risk of metabolic and cardiovascular diseases. Hence, this study aimed to look for the magnitude of metabolic syndrome, poor sleep quality, and impaired lung function, and any association among them, if proven, may be helpful in better management.

Methods. We included sixty cooperative patients through purposive sampling with an age range of 18 to 65 years, meeting the DSM–5 criteria for schizophrenia, and excluded patients with co-morbid substance use disorder except for smokeless tobacco and caffeine. Harmonized criteria were used to diagnose metabolic syndrome; the Pittsburgh Sleep Quality Index (PSQI) for sleep quality and lung function was interpreted as per the Spirometry for Health Care Providers, Global Initiative for Chronic Obstructive Lung Disease.

Results. 55% were found to have metabolic syndrome. Poor sleep quality (PSQI > 5) was found in 60% of cases, with the most common sleep abnormality being increased sleep latency (95%). Restrictive Lung Dysfunction (RLD) was found in 46.7% of cases. 66.7% of the participants with metabolic syndrome had RLD, whereas only 22.2% without metabolic syndrome had RLD. The difference was statistically significant. No statistically significant difference was found between metabolic syndrome and sleep quality or sleep quality and RLD.

Conclusion. From the results obtained, it is clear that the prevalence of metabolic syndrome in people with schizophrenia is twice that of the general population, which also contributes to their increased mortality. Thereby, early identification of metabolic disturbances and correcting poor sleep quality and impaired lung function that are associated with an increased risk of metabolic syndrome will lead to increased life expectancy and a decrease in the mortality rate. Since lung function is studied in only a

very few studies all over the world and ours being a novel approach in India showing significant association, it needs to be replicated in a larger sample size.

A Systematic Review of the Perinatal Mental Health Outcomes of Women With Neurodevelopmental Disorders

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Aims. Neurodivergent women have different experiences during pregnancy, childbirth, and parenthood than neurotypical women. However, little is known about the perinatal mental health outcomes and parenting experiences in women with Neurodevelopmental Disorders (ND). The systematic review aimed to summarise the literature on perinatal mental health outcomes and parenting experiences among women with ND.

Methods. MEDLINE, Embase and PsycINFO databases were searched in October 2023 using the keywords related to pregnancy outcomes, perinatal period, mental health, neurodivergent, and neurodevelopmental disorders. Papers were also identified through citation and/or hand searching. Title, abstracts, and full-text articles were independently screened by two authors, and data were extracted using a custom data extraction spreadsheet. The Joanna Briggs Institute and the Mixed Methods appraisal tools were used for the critical appraisal. The heterogeneity across the included studies ruled out the use of meta-analysis. Therefore, results were summarised using a narrative synthesis.

Results. Fourteen studies were included in the final review; four cohort, four case-control, three cross-sectional and three qualitative studies across 940,354 participants. The studies investigated women with Autism, Asperger's syndrome and Attention-Deficit Hyperactivity Disorder (ADHD), who were either clinically diagnosed or scored appropriately on diagnostic questionnaires. Perinatal mental health outcomes covered anxiety and depression. These were measured using questionnaires such as the Edinburgh Postnatal Depression Scale, participant interviews and clinical diagnosis from qualified healthcare professionals. All fourteen studies found a correlation between Neurodevelopmental Disorders and perinatal anxiety and/or depression symptoms. Seven studies found that neurodivergent women had adverse pregnancy and early parenting experiences. Results suggested this correlation may be mediated by factors such as unsatisfactory healthcare, lack of maternal-infant bond, increased sensory overload, issues with emotional attachment, difficulty reading the facial expression of the baby and problems with breastfeeding. Overall, women with ND were more likely to feel anxious and overwhelmed during the perinatal period, a potential risk factor for perinatal mental illness.

Conclusion. Women with ND are at a higher risk of developing perinatal mental illness and adverse early parenting experiences. Abnormal physical and sensory challenges during pregnancy as well as difficulty with emotional connection and infant bonding during postpartum all contribute to the increased risk of perinatal mental illness. Adaptations to appointments and specialised perinatal care are required for women with ND yet are

often not provided. To reduce the risk of perinatal illness in women with ND, improvements must be made to the delivery of perinatal care and the knowledge of those providing the care.

ComPASSION: A Screening Tool for Type 1 Diabetes and Disordered Eating (T1DE)

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Aims.

Background: In 2018, NHS England funded a one-year project of a combined approach for physical and mental health services to support those with type 1 diabetes and eating disorders – ComPASSION Project. Part of this project looked to develop a questionnaire screening tool to improve early recognition of those at risk of T1DE.

Aims: To assess the effectiveness of an adapted questionnaire in identifying patients at risk of T1DE in a routine diabetes clinic. To this end, we focussed on two main aspects:

1. Discussion around weight and body image – patient discussion topic.
2. Diabetes distress score.

Methods. Data from a modified questionnaire was collected retrospectively from diabetes clinics across two hospital sites July 2019–March 2020 with a total study size of 300 patients. Questionnaire responses from those with T1DE were compared with those without.

Results. The questionnaire screening tool is an effective screening tool identifying Type 1 diabetic patients at risk of disordered eating. Patients with T1DE were more likely to raise concerns regarding weight and/or body image. Diabetes distress scores were significantly greater in T1DE patients.

Conclusion. Healthcare professionals should be alert to patients with Type 1 diabetes at risk of disordered eating. Early identification of patients with T1DE is possible when using patient discussion topics and assessing the diabetes distress score. Further studies are needed to assess the effectiveness of this questionnaire screening tool on a larger population.

Socio-Demographic and Clinical Characteristics of First-Ever Admitted Psychiatric Inpatients in Palestine: A Cross-Sectional Study

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Aims. Bethlehem Psychiatric Hospital is the only psychiatric hospital in the West Bank. Epidemiological data on mental health in Palestine is very limited due to the lack of research in this area. This study aims to evaluate the socio-demographic characteristics and clinical outcomes of first-time admitted patients at Bethlehem Psychiatric Hospital over a year period.

Methods. A retrospective cross-sectional study was conducted at the Bethlehem Psychiatric Hospital, reviewing the medical records of patients admitted for the first time between October 2022 and October 2023. Data collection was conducted manually by residents through an Excel sheet. Next, demographic characteristics (socioeconomic and demographic measures), relevant history (past medical, psychiatric, and forensic), presenting episode characteristics, and current hospitalization (admission, hospital stay, and discharge) were studied descriptively.

Results. Of the 140 patients admitted for the first time to the psychiatric hospital between October 2022 and October 2023, the mean age was 32.6, a majority (70%) were male, more than half were single, around two-thirds finished high school, and 13.6% had a university degree. Only 41.4% of patients were referred from a medical or legal source. The overwhelming majority of the patients had poor prior outpatient follow-up.

Substance use was common (Tobacco: 63.8%, alcohol: 16.1%, and other substances: 26.4%). Family history of psychiatric illness was found in 40% of the cases, and prior imprisonment in 42%.

The most common presenting complaints included: sleep disturbances (84.3%), and physical aggression (73.6%). Delusions were elicited in 72.9% (most commonly persecutory-paranoid, and least commonly grandiose and reference delusions). Hallucinations were present in 38.6% of admissions, auditory hallucinations were the most common. 15.4% had depressed mood, and 22.1% had current suicidal ideations.

Involuntary admissions constituted 62.1% of all admissions. A third of urine drug tests, conducted in 68.6%, came back positive. Patients stayed a mean of 17.8 days. A diagnosis was reached in 82.1% of patients, the most common established diagnosis was Schizophrenia spectrum (42.9%). Around a third were discharged against medical advice.

Conclusion. This is the first study conducted on Palestinian psychiatric inpatients. The results of this study suggest that most patients who are admitted had poor outpatient care. Delusions were elicited in the majority of patients, amongst different final diagnoses.

There is a need for more research on Palestinian psychiatry, integrative social services, and better mental health regulations to protect the rights of mental health patients.

Gender Differences Amongst First-Time Admitted Psychiatric Inpatients in Palestine

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