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Barriers in managing psychiatric disorders in athletesK. Shah^{1*}, M. Ghouse² and D. Kamrai¹¹Department Of Psychiatry, Griffin Memorial Hospital, Norman, United States of America and ²Psychiatry, Griffin Memorial Hospital, Norman, United States of America

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Introduction: Athletes have participated in sports and physical exercise for several decades as a coping strategy to alleviate mental health and behavioral issues. The increasing prevalence of psychiatric disorders among athletes attributed to the failure of its appropriate management.

Objectives: Our goal is to identify barriers in diagnosing and treating psychiatric problems among sportspersons to educate clinicians about the potential risk factors for athletes' mental health disorders to provide optimal medical care.

Methods: We examined MeSH terms "Athletes," "Sports," "Risk Factors," "Diagnosis," and "Patient Care Management," in the context of "Mental Health," "Mental Disorders," "sports psychiatry," and "diagnostic barriers." We included 23 studies per the PRISMA guidelines, searching Medline, PubMed, PubMed Central, and PsychInfo databases until August 2020.

Results: Barriers managing psychiatric disorders in athletes are overtraining syndrome, compensatory training, idolizing, negative coping mechanisms, social stigma, injuries, and performance-enhancing supplements usage. Other factors attributed to diagnostic barriers are general perceptions, age, racial and gender disparities, poor health services, interpersonal issues, patient-therapist relationships, sense of entitlement, control or confidentiality problems, and lack of quality preventative measures. Risk factors are injuries, sports type, doping, substance abuse, lifestyle, failures in achievement, eating disorders, and maladaptive coping mechanisms.

Conclusions: These barriers in psychiatric care have adversely impacted the mental health of sportspersons. Athletes have deviated from their careers and lost valuable periods of their lives due to inadequate attention to sports psychiatry aspects, such as cognitive health services, inclusive sports management measures, diagnostic and treatment approaches, reliable mental health services, and public awareness programs.

Keywords: sports psychiatry; athletes; diagnostic barriers

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New mental health laws in bosnia and herzegovina- step towards in our practiceG. Racetovic^{1*}, M. Latinovic², G. Cerkez³ and E. Mesic⁴¹Community Mental Health Center, Health Center Prijedor, Prijedor, Bosnia and Herzegovina; ²Department For Health Care, Ministry of Health and Social Welfare of the Republic of Srpska, Banja Luka, Bosnia and Herzegovina; ³Department For Public Health, Federal Ministry of Health, Sarajevo, Bosnia and Herzegovina and ⁴Project Of Mental Health In Bosnia And Herzegovina, Association XY, Sarajevo, Bosnia and Herzegovina

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Introduction: Establishing broad spectrum of new mental health services in whole Bosnia and Herzegovina (BH) existing mental health laws in both entities needed to be upgrade according positive results of the mental health reform in the country. Previous laws were exclusively oriented on protection of rights of the people with mental health disorders in (mainly) psychiatric institutions and were progressive and new in the period of their implementation (2001-2004).

Objectives: Since 2010 main reform processes had direction to community mental health care and developed positive movement with implementing new services oriented to patients and their needs/continuity of care. For example case management and occupational therapy are part of daily work in whole country and standards established through accreditation process lead to uniform approach in community work in the area of mental health.

Methods: Comparative analysis of laws in BH concerning mental health.

Results: Carefully and good preparation for pronouncement of new Mental Health Law both in Republic of Srpska and Federation of BH were supported from both entities (task forces, drafts and proposition of the law and public discussion) and they are formally supported in both entities parliaments in 2020 (prolonged since COVID-19 situation). In both laws is more emphasised role of community services, prevention, and post-hospital rehabilitation as continuity of care. Book of rules that follow the laws will be established no longer than the end of 2020.

Conclusions: New mental health laws in BH are path to better protection of mental health of all population in BH and rights of our patients' recovery.

Keywords: Mental Health; Law; Stigma

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Mental disorders management in general practice

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Introduction: Compared to specialized care, primary care is considered to be more accessible, less stigmatizing, and more comprehensive since it manages physical ailments along with mental disorders (MD). Thus, MD are mainly treated by general practitioners (GP), even though their ability to diagnose and treat these diseases is often considered unsatisfactory.

Objectives: This study aimed to analyze perceptions of GP capacity to manage MD, and to assess the difficulties encountered during this management.

Methods: A cross-sectional web-based survey design was adopted between August 22 and September 23, 2020, so that 47 responses of GP were included.

Results: The mean age of respondents was 37.3 years. Among them, only 17% attended a post-university psychiatric training. On average, 6.3% of GP visits were MD-related. Anxious disorders and depression were perceived as very frequent respectively in 82.9% and 40.4% of cases. Among GP, 17% considered bipolar disorder as a difficult pathology to diagnose, followed by schizophrenia (12.7%), while the pathologies perceived to be most difficult to