

Denmark between 01jan2016 and 06apr2020. Patient characteristics and data on body weight was extracted from electronic medical records. The association between PHT and weight change per year was analyzed using linear regression. PHT was determined between each measurement as the total number of days hospitalized divided by the total number of days. Analyses were adjusted for gender, age, smoking, and antipsychotic medication.

Results: The cohort included 328 FMHP, of which 91% were diagnosed with schizophrenia. PHT had a significant positive dose-response association with weight change, with an estimated difference of +4.0 kg/year for FMHP who were hospitalized 100% of the time, compared to FMHP who were exclusively treated as outpatients. The associations were different for FMHP belonging to different categories of BMI at baseline (test for interaction; $p=0.006$). Underweight hospitalized FMHP had the largest difference in weight gain compared to FMHP treated outside hospitals (+18.0 kg/year, $p=0.006$), and the difference was smallest in obese FMHP (+2.3 kg/year, $p=0.21$).

Conclusions: PHT was positively associated with weight change among FMHP.

Disclosure: No significant relationships.

Keywords: Forensic mental health patients; Body weight; Outpatients; Inpatients

EPV0767

Forensic psychiatry in Pakistan: Where next following the Supreme Court judgement

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Introduction: No statutory mental health services exist for justice-involved individuals in Pakistan. The lack of expertise in forensic psychiatry serves to deny individuals with mental illness the critical support needed for mental healthcare and adequate court dispositions with serious unintended consequences including capital punishment for those who could otherwise be deemed treatment and not punishment worthy. A landmark judgement by the Supreme Court of Pakistan in February 2021 criticized the lack of forensic psychiatry expertise in Pakistan and directing the development of forensic mental health services and forensic psychiatry training in Pakistan.

Objectives: The key objectives are: 1. Understanding the timeline of how justice involved individuals are managed by psychiatric services 2. The importance of the Supreme Court of Pakistan Judgement in affecting change 3. Highlights on how Queen's University will enhance forensic psychiatry in Pakistan

Methods: A literature review and personal networking facilitated the collection of important data in how justice involved individuals are supported in Pakistan. The author has published and presented to Pakistani psychiatrists and the Pakistani judiciary on this topic. Queen's University is aiming to implement a 3-year plan to develop an online curriculum and certificate course to help train the trainers.

Results: In the Pakistan's most populous province, Punjab, prevalence rates for psychotic illnesses (3.7%), major depression (10%), and personality disorders (65%) among men with higher rates for psychotic disorders (4.0%) and major depression (12%) among women.

Conclusions: In conclusion there is a dire need to develop forensic psychiatry in Pakistan and other low/middle income countries.

Disclosure: No significant relationships.

Keywords: forensic; pakistan; psychiatry; justice

EPV0768

Association of early maladaptive schemas and psychiatric disorders between sex offenders

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Introduction: Schema-therapy (ST) - one of the promising integrative models of psychotherapy, which shows its efficacy in many mental disorders. ST has main theoretical concepts: early maladaptive schemas (EMS), coping styles, modes and basic needs. EMS are self-defeating emotional and cognitive patterns established from childhood and repeated throughout life. Existing literature shows the connection between EMS and behavioral problems, which could be more significant for patients with personality disorders. The prevalence of personality disorders is relatively low in the general population, but it's highly overrepresented in the forensic population, especially in groups of sex offenders.

Objectives: The aim of this study is to examine if there is a prevalence of some EMS between sex offenders and their association with a diagnosed psychiatric disorder.

Methods: Medical records and criminal case materials of 27 patients were reviewed, all of them were blamed for committing sex crimes and had to stay at the department for one month for forensic psychiatry examination. During their stay patients were examined several times and questioned with YSQ S3R.

Results: Most of the patients had psychiatric disorder: specific personality disorders (14), pedophilia (3), dependence syndrome (4), organic personality disorder (3). Some of them had several psychiatric diagnoses. The most prevalent EMS were abandonment, emotional deprivation, insufficient self-control and defectiveness.

Conclusions: These findings show the prevalence of personality disorder and several EMS in sex offenders, which could be useful for the full understanding of the concept of PD and improve the organization of medical care for these individuals.

Disclosure: No significant relationships.

Keywords: forensic psychiatry; schema-therapy; personality disorder; sex offender

EPV0769

Safer communities; how the first forensic community mental health team helped improve mental health, battle stigma, and reduce offending

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Introduction: Qatar established its Forensic Community Mental Health Team (FCMHT) in 2019 as part of the region's first comprehensive forensic psychiatry service. We present here the data on clinical and offending outcomes since its establishment and compare this with data from before the service was established

Objectives: To compare clinical and offending outcomes in mental health patients with criminal offending histories in Qatar before and after the establishment of Forensic Community Mental Health Team (FCMHT).

Methods: This is a retrospective study comparing the socio-demographical characteristics, clinical outcome and recidivism measures of forensic patients, under the FCMHT for the last two years with data from a similar period before the services were in place.

Results: Data for 170 patients in total was analyzed. 85 patients currently under the active care of forensic community team were matched with a comparable group before the establishment of the services. The re-admission and reoffending rates after the establishment of the service over 1 year of follow up was 15% and 20% respectively compared with 60% and 85% of the group before the service.

Conclusions: Since its inception, the FCMHT has made significant positive impact on quality of life, mental well-being and safety of patients under its care. Close working relationships with criminal justice system, families and carers has helped fight stigma and promote safer community.

Disclosure: No significant relationships.

Keywords: Qatar; forensic psychiatry; readmission; Recidivism

EPV0771

Zero violence or zero seclusion. Which is more acceptable in our hospitals?

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Introduction: There is an established association between serious mental illness and violence. Secure forensic psychiatric services provide care and treatment to mentally disordered offenders. The majority of patients in forensic services suffer from severe mental illnesses such as schizophrenia, with co-morbid polysubstance abuse and maladaptive personality traits. Psychiatric services are under significant pressure to reduce the use of seclusion and restrictive practices, whilst mandated to provide safe environments for patients and staff.

Objectives: To determine the number and characteristics of violent incidents in a secure forensic hospital in Ireland.

Methods: A retrospective review of all incidents in Central Mental Hospital, Ireland between 1st March 2019 and 31st August 2021 was completed. Incidents were categorised into physical assaults and other violent incidents. Demographic measures and measures of violence risk (HCR-20), functioning (GAF), programme completion and recovery (DUNDRUM tool) were collated.

Results: A total of 321 incidents took place during the period examined, of which 47 (14.6%) involved physical assaults perpetrated by patients. Between March 2020 and August 2021, numbers of assaults increased by 50% and 78% compared to the preceding six-month period respectively. The majority of assaults were committed by a relatively small group of patients. Victims of assaults were more likely to be patients (n=27, 57.4%) and more likely to be males (n=43, 91.9%).

Conclusions: Physical assaults and other violent incidents happen in forensic and general psychiatric units. Restrictive practices, used in accordance with the law, are necessary at times to prevent serious harm to patients and staff in psychiatric hospitals.

Disclosure: No significant relationships.

Keywords: violence; Restrictive practice; seclusion; mental illness

EPV0773

Containing Chaos: A Self-Reflection of a Final Year Medical Student's Elective in a High Security Psychiatric Hospital

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Introduction: Throughout training, medical students are often only exposed to a limited selection of psychiatric specialities, predominantly general adult inpatient settings. This medical student had the opportunity to undergo a placement at a high security forensic hospital. With only three such hospitals in England, this is an environment that few students and even qualified doctors have been able to experience. In this presentation, the author will explore their prior expectations, key skills gained, and surprising realisations that made the elective highly valuable.

Objectives: To reflect on the skills learned and revelations made during the elective period and share these as a presentation.

Methods: The author completed a 6-week placement at Ashworth High Security Psychiatric Hospital. He then reflected on his experiences.

Results: This placement allowed the development of a range of skills and personal discoveries. The skills included enhanced personal safety awareness, improved use of varied communication styles, and de-escalation and management techniques with higher risk patients. The main finding was the fine line between Ashworth's patients and mainstream society, and how easily these two entities can overlap. *Carl Jung* spoke of a 'shadow' that must be integrated, and the humanity within each patient made this philosophical concept a sobering reality.

Conclusions: High security placements are valuable educational opportunities and teach important skills, not often found in the current medical school curriculum. These placements offer the transferable communication and interpersonal skills essential in any budding psychiatrist, and also provide a vital environment for self-reflection and personal growth.

Disclosure: No significant relationships.

Keywords: undergraduate; reflection; Elective; forensic