significantly reduced in those patients whose families receive psychoeducational interventions. Even though most of available evidences are related to the short-term efficacy of psychoeducational family interventions (PFI). No evidence is available on medium and long-term efficacy.

Objectives: This study aims to assess the efficacy after one and five years of PFI in BD in terms of: 1) improvement of patients' symptoms and global functioning; 2) improvement of relatives' objective and subjective burden and coping strategies.

Methods: A multicenter, controlled, outpatient trial has been conducted in BD patients and their key relatives, recruited in 11 Italian mental health centers. Patient's clinical status, social and personal functioning, burden of illness, and relative's burden and coping strategies were assessed with specific instruments at baseline, after 1 year and after 5 years.

Results: 137 families were recruited, 70 allocated to the experimental intervention. After one year, an increasing positive effect on patients' clinical status, global functioning and objective and subjective burden was found. Moreover, were observed a reduced number of relapses and of hospitalizations after five years, compared to the control group. A reduction in the levels of family burden and an improvement of their coping strategies were also observed.

Conclusions: Positive effects of the experimental intervention persist over the mid and long-term period. PFI should be provided in mental health centres to patients with BD and their relatives.

Disclosure: No significant relationships.

Keywords: Bipolar I Disorder; psychoeducation; Family burden; coping

EPV1275

Algorithm based online speech evaluation - the new horizon

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Introduction: The VML method was developed and designed to treat Apraxia of speech focusing on the Autistic population. After experiencing over 2000 children in many countries around the world, we have developed an algorithm which represents the VML analysis process. The algorithm includes almost 1000 conditions and was found reliable with copying the in-person VML evaluation. The algorithm generates a treatment program with 95% accuracy of the elected treatment topics.

Objectives: The objective of the VML software is to enable the VML analysis and treatment at low cost to wide population around the world, at home. The program includes main treatment topics, detailed exercises, picture and videos demonstrating the proposed treatment and general guidelines. The software users are supported by the VML experts around the world.

Methods: Based on the algorithm, we have developed a software which can produce a highly detailed motor speech treatment program. The software is web based, available now in English, Mandarin and soon in other languages as well. The user is required to fill in the speech data using the software interface.

Results: The uniqe sofetware was tested and found to have 90% reliability rate in comparison to a VML expert treatment program. In addition it was found to have the ability to over come mild evaluation mistakes while producing an effective treatment program.

Conclusions: The MYVML evaluation software is innovation in the field of speech treatment, striving to share the knowledge and give the treatment tool to as many practitioners and families as possible.

Disclosure: I am the developer of the VML software described in the abstract

Keywords: Apraxia of speech; algorithm; VML method; Treatment

EPV1276

Interdisciplinary approach to pediatric rehabilitation -The MDT method

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Introduction: Interdisciplinarity involves the combining of two or more academic disciplines into one activity (e.g. a research project). It is about creating something new by crossing traditional boundaries between academic disciplines or schools of thought, as new needs and professions emerge, and thinking across them. The roots of interdisciplinarity can be found hundreds of years ago however, In the twentieth century it became a more academic movement.

Objectives: Interdisciplinarity also involves integrated thinking, borrowing ideas and metaphors, collaboration, flexibility in thinking, innovation and complex problem solving. The traditional professional model is usually disciplinary. Complex problems sometimes demand interdisciplinary solution. There is a constant dispute between the disciplinary and interdisciplinary approaches.

Methods: The MDT (Multidimessional therapy) method is part of the transdisciplinary approach. This is the next step after interdisciplinarity in which there are no boundaries between disciplines and the role of a primary therapist is established.

Results: The MDT is a system that implements the integrative therapy perception, and strives for optimal integration of all developmental areas, disciplines, methods, goals, schools, activities etc. So the child is seen as a whole and all developmental areas are considered in unison. The integration takes place at different aspects of therapy: evaluation, analysis process, case management, team work, disciplines and methods, therapist, goals and exercises. The MDT uses variuos integrative tools evaluation such as analysis process, primary therapist or integrative goals and exercises.

Conclusions: This lecture will present the structure and uniqueness of the system and the approach in order to introduce the beneficiary aspects of the integrative model in treatment of complex cases.

Disclosure: No significant relationships. **Keywords:** Interdisciplinary; MDT; autism; rehabilitation