

lockdown. During this period, their fear levels could modify their psychiatric admission rates. We suggest that the decrease of psychiatric admissions in the elderly was due to fear of contagion in hospitals.

**Disclosure of Interest:** None Declared

## EPP0208

### Transcranial magnetic stimulation in late-aged people with depressive disorders

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**Introduction:** One of the most common mental disorders in the elderly is depression.

Because of the high frequency of side effects of pharmacotherapy and the comorbid medical illnesses, there are not many ways to treat it.

Non-drug therapies, such as repetitive transcranial magnetic stimulation (rTMS), could help overcome the limitations of standard drug therapy for this type of mental disorders.

**Objectives:** Development of approaches to improving improve the provision of psychiatric care to elderly patients using rTMS.

**Methods:** 30 patients over the age of 60 with anxiety-depressive spectrum disorders meeting criteria F30-39, F06.3, F06.4 (ICD-10) and a control group with similar criteria that were not treated with rTMS, were recruited from the psychiatric department at a university hospital (Moscow Scientific Research Institute of Psychiatry). Clinical, psychopathological, anamnestic, psychometric (Montgomery-Asberg scale (MADRS), Hamilton scale (HARS), Mini-mental state examination scale (MMSE) instrumental (electroencephalography) research methods were used. Patients of the experimental group underwent 15 sessions of low-frequency rTMS on the right dorsolateral prefrontal cortex (RDLPC). Conditions for the application of 1200 pulses were as follows: frequency - 1 Hz; intensity - 120% of the threshold of motor response (RMT) of the subject; pulse number - 1200; pulse sequence - 300; sequence duration - 300 seconds; sequence interval - 60 seconds; and stimulation time - 23 minutes. Subsequently, the patients were re-examined using the above-mentioned scales to assess their mental state in dynamics.

**Results:** Analysis of the collected data shows an increase in the number of respondents and the frequency of achieving remission in the experimental group compared to the control group. No severe side effects of rTMS were observed.

**Conclusions:** rTMS may be a safe method of adjuvant therapy in groups of elderly patients with anxiety-depressive spectrum disorders. Further studies will be needed to clarify the results.

**Disclosure of Interest:** None Declared

## EPP0209

### Empathy training models and the effects on psychological concerns in paid and unpaid caregivers of older people: A systematic review

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**Introduction:** Empathy training directed at empathic abilities and/or aspects of providing care can be effective at increasing levels of this ability. Moreover, training in different care contexts can minimize the negative impacts of providing care.

**Objectives:** To identify empathy training models and the effects on psychological concerns in paid and unpaid caregivers of older people.

**Methods:** A systematic review was conducted. Searches for relevant articles were performed in the Embase, LILACS, PsycInfo, Pubmed, Scopus and Web of Science databases using the following search strategy: "Empathy AND (Education OR Training OR Intervention) AND Caregiver". No restrictions were imposed regarding language or year of publication.

**Results:** Empathy training for caregivers of older people were performed in six studies, three of which identified a significant increase in empathy levels and consequent reduction in psychological concerns. Empathy training focused on aspects of empathy and/or the caregiver had significant effects on the outcome variables. Moreover, training conducted online, by telephone and/or in person can generate satisfactory results. The other three studies that conducted training with a focus on aspects of dementia and/or old age did not present any effect on the outcome variables.

**Conclusions:** Empathy training for caregivers of older people can increase levels of this ability, especially in the cognitive domain, as well as diminish psychological concerns caused by the negative impact of providing care.

**Disclosure of Interest:** None Declared

## EPP0210

### Mortality in older adults with severe mental illness: the role of metabolic syndrome and its components

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**Introduction:** Studies in adult psychiatric patients consistently call attention to premature mortality and its association with metabolic syndrome. However, the utility of the metabolic syndrome construct is controversial in older adults in the general population, since literature shows that some components, such as obesity, can